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BOYS & GIRLS CLUBS OF AMERICA
FORM 990 INCOME TAX RETURN
FOR YEAR ENDED DECEMBER 31, 2024

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

Department of the Treasury
Internal Revenue Service

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. BOYS & GIRLS CLUBS OF AMERICA	Taxpayer identification number (TIN) 13-5562976
	Number, street, and room or suite no. If a P.O. box, see instructions. 1275 PEACHTREE STREET NE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ATLANTA, GA 30309-3506	

Enter the Return Code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08	Form 990-T (governmental entities)	15

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **JASON PENEGAR**
1275 PEACHTREE STREET NE - ATLANTA, GA 30309-3506

Telephone No. **(404) 487-5403** Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box _____
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box _____. If it is for part of the group, check this box _____ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15**, 20 **25**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 calendar year 20 **24** or
 tax year beginning _____, 20 _____, and ending _____, 20 _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2024
Open to Public Inspection

A For the 2024 calendar year, or tax year beginning and ending
B Check if applicable:
C Name of organization: BOYS & GIRLS CLUBS OF AMERICA
D Employer identification number: 13-5562976
E Telephone number: (404) 487-5700
G Gross receipts \$: 232,796,679.
H(a) Is this a group return for subordinates? Yes [X] No
H(b) Are all subordinates included? Yes No
I Tax-exempt status: [X] 501(c)(3)
J Website: WWW.BGCA.ORG
K Form of organization: [X] Corporation
L Year of formation: 1956
M State of legal domicile: DC

Part I Summary
Table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include: 1 Briefly describe the organization's mission...; 2-7 Governance; 8-12 Revenue; 13-19 Expenses; 20-22 Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: JAMES L CLARK, PRESIDENT & CEO
Date
Preparer's name: KATHRINE A. WARLICK
Preparer's signature: KATHRINE A. WARLICK
Date: 03/12/26
Check if self-employed
PTIN: P02065266
Firm's name: CLIFTONLARSONALLENLLP
Firm's EIN: 41-0746749
Firm's address: 227 WEST TRADE STREET, SUITE 800, CHARLOTTE, NC 28202
Phone no. 704-998-5200

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE MISSION OF THE ORGANIZATION IS TO OPERATE EXCLUSIVELY FOR THE BENEFIT OF, OR TO CARRY OUT THE PURPOSES OF, BOYS AND GIRLS CLUBS OF AMERICA, A D.C. CORPORATION THAT WAS CONGRESSIONALLY CHARTERED IN 1956 ("BOYS & GIRLS CLUBS OF AMERICA") AND WHOSE MISSION IS, "TO ENABLE ALL

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 188,079,236. including grants of \$ 88,073,304.) (Revenue \$ 10,898,515.) CLUB EXPERIENCE: QUALITY CLUB EXPERIENCE IS ONE IN WHICH MEMBERS FEEL PHYSICALLY AND EMOTIONALLY SAFE, RECEIVE SUPPORT AND RECOGNITION FROM CARING ADULTS WHO SET EXPECTATIONS FOR THEM, ARE PROVIDED OPPORTUNITIES TO TRY NEW THINGS, HAVE FUN AND FEEL A SENSE OF BELONGING. WHEN CLUB STAFF INTENTIONALLY FOCUS ON THESE YOUTH DEVELOPMENT FUNDAMENTALS AND YOUNG PEOPLE ATTEND THE CLUB MORE FREQUENTLY, THIS COMBINATION DRIVES STRONGER OUTCOMES FOR YOUTH IN BGCA'S THREE PRIORITY AREAS -ACADEMIC SUCCESS, GOOD CHARACTER AND CITIZENSHIP, AND HEALTHY LIFESTYLES. UNDER THE 2025 PROGRAM STRATEGY, TARGETED PROGRAMS WILL BE DESIGNED TO INTEGRATE THE EVIDENCE-BASED STAFF PRACTICES THAT PROMOTE THE FIVE KEY ELEMENTS FOR POSITIVE YOUTH DEVELOPMENT. IN TARGETED PROGRAMS, THESE PRACTICES WILL BE WRITTEN INTO THE CURRICULUM AND IMPLEMENTED IN WAYS

4b (Code:) (Expenses \$ 29,940,675. including grants of \$ 27,263,962.) (Revenue \$ 0.) OFFICE OF JUSTICE PROGRAMS - THROUGH THE PROVISION OF \$28 MILLION NATIONAL MENTORING PROGRAMS FUNDING, OJP/OJJDP PARTNERED WITH BGCA TO STRENGTHEN, EXPAND AND ENHANCE MENTORING PROGRAMS AND EXPERIENCES FOR APPROXIMATELY 30,000 CLUB MEMBERS AGED 6-17 AT SOME 1,400 CLUB SITES IN FIVE SPECIFIC GOAL AREAS: GOAL 1: PROVIDE AND ENHANCE MENTORING SERVICES TO AT-RISK YOUTH AND HIGH-RISK YOUTH WHO EITHER ATTEND OR ARE REFERRED TO A CLUB. GOAL 2: PROVIDE AND ENHANCE MENTORING SERVICES TO AL/AN YOUTH LIVING ON RESERVATIONS WHO ATTEND OR ARE REFERRED TO A CLUB. GOAL 3: PROVIDE AND ENHANCE SITE-BASED MENTORING SERVICES TO YOUTH WITH A PARENT IN THE MILITARY WHO EITHER ATTEND OR ARE REFERRED TO A CLUB. GOAL 4: PROVIDE AND ENHANCE INTENSIVE MENTORING SERVICES USING TARGETED OUTREACH DELINQUENCY AND GANG PREVENTION STRATEGIES FOR

4c (Code:) (Expenses \$ 759,604. including grants of \$ 6,175,801.) (Revenue \$ 0.) NATIONAL YOUTH OF THE YEAR PROGRAM - YOUTH OF THE YEAR IS THE EMBODIMENT OF EVERYTHING THAT BOYS & GIRLS CLUBS OF AMERICA DOES AS AN ORGANIZATION TO MAKE OUR NATION'S YOUNG PEOPLE LIFE-READY AND COLLEGE-AND CAREER-READY SO THAT THE FUTURE IS GREATER, LIVES ARE CHANGED, AND LEADERS ARE STRONG. SINCE 1947, WE HAVE CELEBRATED THE EXTRAORDINARY ACHIEVEMENTS OF CLUB TEENS. STORIES OF OUTSTANDING LEADERSHIP, ACTS OF SERVICE, ACADEMIC EXCELLENCE AND DEDICATION TO A HEALTHY LIFESTYLE HAVE MADE THIS PROGRAM THE NATION'S PREMIER LEADERSHIP AND RECOGNITION PROGRAM FOR TEENS. YOUTH OF THE YEAR PROGRAM HAS CONTINUED TO GROW SINCE THE BEGINNING. NEARLY 100,000 YOUTH PARTICIPATE IN THE YOUTH OF THE YEAR PROGRAM THROUGHOUT THE MOVEMENT. THROUGH THE YOUTH OF THE YEAR SPEAKER'S BUREAU, A GROUP OF YOUTH OF THE

4d Other program services (Describe on Schedule O.) (Expenses \$ 16,944,201. including grants of \$) (Revenue \$ 13,062,414.)

4e Total program service expenses 235,723,716.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements, such as political campaign activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefits, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 17 regarding employee reporting, tax returns, business income, foreign accounts, prohibited transactions, and various organizational requirements.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 44; 1b Enter the number of voting members included... 43; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders? X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? X; 8b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official X; 15b Other officers or key employees of the organization X; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed GA, AL, AZ, AR, CA, CO, CT, DE, DC, FL, HI, ID
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
JASON PENEGAR - (404) 487-5403
1275 PEACHTREE STREET NE, ATLANTA, GA 30309-3506

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CLARK, JAMES L. PRESIDENT & CEO	40.00 0.00	X		X				2,246,334.	0.	52,336.
(2) ORR, LORRAINE E EXECUTIVE VP & CHIEF OPERATIONS OFFI	40.00 0.00				X			695,428.	0.	52,936.
(3) UNGLO, SAMUEL J. EXECUTIVE VP & CHIEF FINANCIAL OFFIC	40.00 0.00			X				656,197.	0.	52,731.
(4) ANASTASI, ELIZABETH CHIEF DEVELOPMENT & PUBLIC AFFAIRS O	40.00 0.00				X			624,507.	0.	43,184.
(5) MORAIN, KRISTINE B. EXECUTIVE VP & GENERAL COUNSEL, & SE	40.00 0.00			X				570,654.	0.	52,336.
(6) ROBINSON, FELICIA SVP, HUMAN RESOURCES	40.00 0.00				X			473,889.	0.	49,879.
(7) DUGAN, MELISSA P. SVP, GOVERNMENT RELATIONS	40.00 0.00					X		430,033.	0.	43,423.
(8) FOWLKES, ELIZABETH M. SVP, STRATEGY	40.00 0.00					X		402,990.	0.	52,817.
(9) MILLER, JOHN R. SVP, AFFILIATE RELATIONS	40.00 0.00					X		420,020.	0.	35,564.
(10) MILLER, MISTY L. SVP, ORGANIZATIONAL DEVELOPMENT	40.00 0.00					X		421,263.	0.	33,798.
(11) MERHIB, VANESSA E. SVP, DEVELOPMENT	40.00 0.00					X		367,801.	0.	49,702.
(12) ABELE, CHRISTOPHER CHAIR	2.00 0.00	X		X				0.	0.	0.
(13) SCHWAB-POMERANTZ, CARRIE CHAIR EMERITUS	2.00 0.00	X		X				0.	0.	0.
(14) ROGERS, WILLIAM CHAIR ELECT	2.00 0.00	X		X				0.	0.	0.
(15) FALK, THOMAS VICE CHAIR	2.00 0.00	X		X				0.	0.	0.
(16) MORSE, PETER VICE CHAIR	2.00 0.00	X		X				0.	0.	0.
(17) RICE, CONDOLEEZZA VICE CHAIR	2.00 0.00	X		X				0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) LONG, TOM TREASURER	2.00 0.00	X		X				0.	0.	0.
(19) MCNEELY, VALERIE SECRETARY	2.00 0.00	X		X				0.	0.	0.
(20) MALLOY, REVEREND EDWARD ETHICIST	2.00 0.00	X		X				0.	0.	0.
(21) BACH, ROBERT GOVERNOR	2.00 0.00	X						0.	0.	0.
(22) BALL, RUSSELL GOVERNOR	2.00 0.00	X						0.	0.	0.
(23) BISACCIA, LISA GOVERNOR	2.00 3.00	X						0.	0.	0.
(24) BORGAN, DAN GOVERNOR	2.00 0.00	X						0.	0.	0.
(25) BRIDGES, DEBORAH GOVERNOR	2.00 0.00	X						0.	0.	0.
(26) CAPPELLI, GREG GOVERNOR	2.00 0.00	X						0.	0.	0.
1b Subtotal								7,309,116.	0.	518,706.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								7,309,116.	0.	518,706.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 274

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SALESFORCE.ORG, 415 MISSION STREET, 3RD FLOOR, SAN FRANCISCO, CA 94105	LICENSING & MAINTENANCE OF SOFTWARE	5,712,097.
ATLANTA MARRIOTT MARQUIS 265 PEACHTREE CENTER, ATLANTA, GA 30303	CONFERENCE LODGING, CATERING, MEETING	2,315,699.
TRACTION REC TECHNOLOGIES INC, PO BOX 11303, RPO WESSEX, VANCOUVER, BRITISH COLUMBIA	CRM SOFTWARE LICENSING	2,300,000.
PRODUCTION SOLUTIONS INC, 1953 GALLOWAY ROAD, SUITE 500, VIENNA, VA 22182	MARKETING/DIRECT MAIL CAMPAIGN	2,192,242.
ILINK SYSTEMS, INC, 22232 17TH AVENUE SE, SUITE 312, BOTHELL, WA 98021	IT PROGRAMMING SERVICES	1,847,461.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 96

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) CRAWLEY, MANDELL GOVERNOR	2.00 0.00	X						0.	0.	0.
(28) ELLIS, TROY GOVERNOR	2.00 0.00	X						0.	0.	0.
(29) ESSER, PATRICK GOVERNOR	2.00 0.00	X						0.	0.	0.
(30) FITZGERALD, LARRY GOVERNOR	2.00 0.00	X						0.	0.	0.
(31) FRANCE KENNEDY, LESA GOVERNOR	2.00 0.00	X						0.	0.	0.
(32) GITLIN, MIKE GOVERNOR	2.00 0.00	X						0.	0.	0.
(33) GOODELL, WILLIAM GOVERNOR	2.00 4.00	X						0.	0.	0.
(34) IDENO, KAREN GOVERNOR	2.00 0.00	X						0.	0.	0.
(35) LAYTON, STEVE GOVERNOR	2.00 0.00	X						0.	0.	0.
(36) LAZARUS, MARK GOVERNOR	2.00 0.00	X						0.	0.	0.
(37) MANN, JENNIFER GOVERNOR	2.00 0.00	X						0.	0.	0.
(38) MCDEW, DARREN GOVERNOR	2.00 0.00	X						0.	0.	0.
(39) MCQUADE, EUGENE GOVERNOR	2.00 0.00	X						0.	0.	0.
(40) OTIS, CLARENCE GOVERNOR	2.00 0.00	X						0.	0.	0.
(41) REAGINS, TONY GOVERNOR	2.00 0.00	X						0.	0.	0.
(42) RODRIGUEZ, ALEX GOVERNOR	2.00 0.00	X						0.	0.	0.
(43) ROTH, BYRON GOVERNOR	2.00 4.00	X						0.	0.	0.
(44) SCHMIDT, PAUL GOVERNOR	2.00 0.00	X						0.	0.	0.
(45) SEATON, DAVID GOVERNOR	2.00 3.00	X						0.	0.	0.
(46) SHANKS, DAVID GOVERNOR	2.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	8,963,661.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	36,837,707.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	161,244,775.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 1,493,152.				
	h Total. Add lines 1a-1f		207,046,143.				
Program Service Revenue	2 a MEMBERSHIP DUES	Business Code					
		900099	10,898,515.	10,898,515.			
	b CLUB REGISTRATION FEES	900099	6,779,513.	6,779,513.			
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f		17,678,028.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		599,114.			599,114.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	4,916.				
	c Gain or (loss)	7c	-4,916.				
	d Net gain or (loss)		-4,916.			-4,916.	
8 a Gross income from fundraising events (not including \$ 8,963,661. of contributions reported on line 1c). See Part IV, line 18	8a		1,190,493.				
		b Less: direct expenses	8b	3,226,979.			
		c Net income or (loss) from fundraising events		-2,036,486.			-2,036,486.
9 a Gross income from gaming activities. See Part IV, line 19	9a						
		b Less: direct expenses	9b				
		c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	10a						
		b Less: cost of goods sold	10b				
		c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11 a LICENSING REVENUE	Business Code					
		900099	5,043,049.	5,043,049.			
	b MISCELLANEOUS	900099	647,621.	647,621.			
	c MANAGEMENT	900099	592,231.	592,231.			
	d All other revenue						
e Total. Add lines 11a-11d		6,282,901.					
12 Total revenue. See instructions		229,564,784.	23,960,929.	0.	-1,442,288.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	120,341,675.	120,341,675.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,171,392.	1,171,392.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,570,415.	4,066,403.	724,154.	779,858.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	65,679,091.	47,539,777.	8,648,231.	9,491,083.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,940,454.	3,002,045.	433,844.	504,565.
9 Other employee benefits	8,289,806.	6,311,592.	915,218.	1,062,996.
10 Payroll taxes	4,915,695.	3,785,906.	375,968.	753,821.
11 Fees for services (nonemployees):				
a Management				
b Legal	655,761.	536,554.	76,029.	43,178.
c Accounting	687,985.	562,920.	79,765.	45,300.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	343,834.			343,834.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	23,411,569.	19,155,707.	2,714,346.	1,541,516.
12 Advertising and promotion	762,749.	624,093.	88,433.	50,223.
13 Office expenses	7,035,986.	6,264,094.	419,803.	352,089.
14 Information technology	8,286,077.	6,779,796.	960,691.	545,590.
15 Royalties				
16 Occupancy	553,638.	171,052.	330,293.	52,293.
17 Travel	6,674,733.	5,763,054.	343,322.	568,357.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	8,707,323.	7,652,861.	798,237.	256,225.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,471,041.	879,205.	311,096.	280,740.
23 Insurance	1,339,143.	413,743.	798,914.	126,486.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MISCELLANEOUS	2,195,668.	641,901.	986,786.	566,981.
b BAD DEBT EXPENSE	1,272,512.		1,272,512.	
c MEMBERSHIP DUES	101,729.	59,946.	39,248.	2,535.
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	273,408,276.	235,723,716.	20,316,890.	17,367,670.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	2,479,367.	2	2,388,689.
	3 Pledges and grants receivable, net	50,944,550.	3	36,878,423.
	4 Accounts receivable, net	4,351,609.	4	3,509,855.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,356,491.	9	1,806,390.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 15,041,962.		
	b Less: accumulated depreciation	10b 12,146,573.	4,149,355.	10c 2,895,389.
	11 Investments - publicly traded securities	16,376,723.	11	34,780,526.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	10,301,783.	15	12,940,048.
16 Total assets. Add lines 1 through 15 (must equal line 33)	89,959,878.	16	95,199,320.	
Liabilities	17 Accounts payable and accrued expenses	25,721,357.	17	26,940,249.
	18 Grants payable		18	
	19 Deferred revenue	3,319,711.	19	5,911,265.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	4,615,073.	25	5,012,892.
	26 Total liabilities. Add lines 17 through 25	33,656,141.	26	37,864,406.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	-3,401,408.	27	2,843,560.
	28 Net assets with donor restrictions	59,705,145.	28	54,491,354.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	56,303,737.	32	57,334,914.
33 Total liabilities and net assets/fund balances	89,959,878.	33	95,199,320.	

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Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	229,564,784.
2	Total expenses (must equal Part IX, column (A), line 25)	2	273,408,276.
3	Revenue less expenses. Subtract line 2 from line 1	3	-43,843,492.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	56,303,737.
5	Net unrealized gains (losses) on investments	5	6,636.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	44,868,033.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	57,334,914.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form **990** (2024)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities, whether or not the business is regularly carried on; 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)); 15 Public support percentage from 2023 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; 17a 10% -facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization; b 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	199,317,841.	207,957,559.	193,901,752.	156,226,267.	207,046,143.	964,449,562.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	8,387,130.	8,944,425.	10,382,117.	12,464,233.	22,721,077.	62,898,982.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	207,704,971.	216,901,984.	204,283,869.	168,690,500.	229,767,220.	1027348544.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	2,477,543.	3,363,398.	4,311,835.	6,900,023.	6,079,610.	23,132,409.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b	2,477,543.	3,363,398.	4,311,835.	6,900,023.	6,079,610.	23,132,409.
8 Public support. (Subtract line 7c from line 6.)						1004216135.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6	207,704,971.	216,901,984.	204,283,869.	168,690,500.	229,767,220.	1027348544.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	942,897.	83,625.	18,407.	1,187.	599,114.	1,645,230.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	942,897.	83,625.	18,407.	1,187.	599,114.	1,645,230.
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	1,305,948.	315,363.	0.	0.	0.	1,621,311.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,499,982.	611,484.	3,544,008.	4,530,760.	8,705,311.	18,891,545.
13 Total support. (Add lines 9, 10c, 11, and 12.)	211,453,798.	217,912,456.	207,846,284.	173,222,447.	239,071,645.	1049506630.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	95.68 %
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	98.19 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	.16 %
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	.36 %

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Schedule A (Form 990) 2024

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:

INCOME FROM FUNDS CO.

2023 AMOUNT: \$ 1,790,815.

2024 AMOUNT: \$ 7,465,459.

MANAGEMENT

2023 AMOUNT: \$ 611,400.

2024 AMOUNT: \$ 592,231.

MISCELLANEOUS

2020 AMOUNT: \$ 1,499,982.

2021 AMOUNT: \$ 611,484.

2022 AMOUNT: \$ 3,544,008.

2023 AMOUNT: \$ 2,128,545.

2024 AMOUNT: \$ 647,621.

**Schedule B
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>30,100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>20,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>8,530,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>8,326,409.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>8,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>5,063,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	 <hr/> <hr/> <hr/>	\$ 3,400,781.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
8	 <hr/> <hr/> <hr/>	\$ 3,279,144.	Person <input checked="" type="checkbox"/> Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9	 <hr/> <hr/> <hr/>	\$ 3,110,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
10	 <hr/> <hr/> <hr/>	\$ 3,071,439.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
11	 <hr/> <hr/> <hr/>	\$ 3,000,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
12	 <hr/> <hr/> <hr/>	\$ 2,376,681.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	<hr/> <hr/> <hr/>	\$ 2,112,171.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
14	<hr/> <hr/> <hr/>	\$ 1,781,250.	Person <input checked="" type="checkbox"/> Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
15	<hr/> <hr/> <hr/>	\$ 1,760,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
16	<hr/> <hr/> <hr/>	\$ 1,709,758.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
17	<hr/> <hr/> <hr/>	\$ 1,679,653.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
18	<hr/> <hr/> <hr/>	\$ 1,500,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	<hr/> <hr/> <hr/>	\$ 1,400,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
20	<hr/> <hr/> <hr/>	\$ 1,316,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	<hr/> <hr/> <hr/>	\$ 1,300,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
22	<hr/> <hr/> <hr/>	\$ 1,115,514.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
23	<hr/> <hr/> <hr/>	\$ 1,094,901.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
24	<hr/> <hr/> <hr/>	\$ 1,050,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	<hr/> <hr/> <hr/>	\$ 1,025,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
26	<hr/> <hr/> <hr/>	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	<hr/> <hr/> <hr/>	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
28	<hr/> <hr/> <hr/>	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
29	<hr/> <hr/> <hr/>	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
30	<hr/> <hr/> <hr/>	\$ 968,631.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	<hr/> <hr/> <hr/>	\$ 925,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
32	<hr/> <hr/> <hr/>	\$ 855,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	<hr/> <hr/> <hr/>	\$ 835,391.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
34	<hr/> <hr/> <hr/>	\$ 750,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
35	<hr/> <hr/> <hr/>	\$ 725,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
36	<hr/> <hr/> <hr/>	\$ 708,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	<hr/> <hr/> <hr/>	\$ 660,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
38	<hr/> <hr/> <hr/>	\$ 654,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	<hr/> <hr/> <hr/>	\$ 608,454.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
40	<hr/> <hr/> <hr/>	\$ 600,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
41	<hr/> <hr/> <hr/>	\$ 600,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
42	<hr/> <hr/> <hr/>	\$ 585,455.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	<hr/> <hr/> <hr/>	\$ 548,738.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
44	<hr/> <hr/> <hr/>	\$ 510,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	<hr/> <hr/> <hr/>	\$ 501,008.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
46	<hr/> <hr/> <hr/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
47	<hr/> <hr/> <hr/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
48	<hr/> <hr/> <hr/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	<hr/> <hr/> <hr/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
50	<hr/> <hr/> <hr/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
51	<hr/> <hr/> <hr/>	\$ 470,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
52	<hr/> <hr/> <hr/>	\$ 401,125.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
53	<hr/> <hr/> <hr/>	\$ 400,068.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
54	<hr/> <hr/> <hr/>	\$ 400,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	<hr/> <hr/> <hr/>	\$ 400,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
56	<hr/> <hr/> <hr/>	\$ 379,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
57	<hr/> <hr/> <hr/>	\$ 369,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
58	<hr/> <hr/> <hr/>	\$ 355,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
59	<hr/> <hr/> <hr/>	\$ 340,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
60	<hr/> <hr/> <hr/>	\$ 325,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61	<hr/> <hr/> <hr/>	\$ 307,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
62	<hr/> <hr/> <hr/>	\$ 301,363.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
63	<hr/> <hr/> <hr/>	\$ 300,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
64	<hr/> <hr/> <hr/>	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
65	<hr/> <hr/> <hr/>	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
66	<hr/> <hr/> <hr/>	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67	<hr/> <hr/> <hr/>	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
68	<hr/> <hr/> <hr/>	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
69	<hr/> <hr/> <hr/>	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
70	<hr/> <hr/> <hr/>	\$ 287,496.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
71	<hr/> <hr/> <hr/>	\$ 270,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
72	<hr/> <hr/> <hr/>	\$ 262,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73	 <hr/> <hr/> <hr/>	\$ 260,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
74	 <hr/> <hr/> <hr/>	\$ 259,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
75	 <hr/> <hr/> <hr/>	\$ 253,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
76	 <hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
77	 <hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
78	 <hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
79	<hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
80	<hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
81	<hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
82	<hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
83	<hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
84	<hr/> <hr/> <hr/>	\$ 240,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
85	<hr/> <hr/> <hr/>	\$ 232,381.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
86	<hr/> <hr/> <hr/>	\$ 220,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
87	<hr/> <hr/> <hr/>	\$ 209,838.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
88	<hr/> <hr/> <hr/>	\$ 203,328.	Person <input type="checkbox"/> Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
89	<hr/> <hr/> <hr/>	\$ 201,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
90	<hr/> <hr/> <hr/>	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
91	<hr/> <hr/> <hr/>	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
92	<hr/> <hr/> <hr/>	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
93	<hr/> <hr/> <hr/>	\$ 199,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
94	<hr/> <hr/> <hr/>	\$ 194,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
95	<hr/> <hr/> <hr/>	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
96	<hr/> <hr/> <hr/>	\$ 160,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
97	<hr/> <hr/> <hr/>	\$ 160,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
98	<hr/> <hr/> <hr/>	\$ 158,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
99	<hr/> <hr/> <hr/>	\$ 153,488.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
100	<hr/> <hr/> <hr/>	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
101	<hr/> <hr/> <hr/>	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
102	<hr/> <hr/> <hr/>	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
103	<hr/> <hr/> <hr/>	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
104	<hr/> <hr/> <hr/>	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
105	<hr/> <hr/> <hr/>	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
106	<hr/> <hr/> <hr/>	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
107	<hr/> <hr/> <hr/>	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
108	<hr/> <hr/> <hr/>	\$ 148,080.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
109	<hr/> <hr/> <hr/>	\$ 130,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
110	<hr/> <hr/> <hr/>	\$ 126,906.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
111	<hr/> <hr/> <hr/>	\$ 126,889.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
112	<hr/> <hr/> <hr/>	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
113	<hr/> <hr/> <hr/>	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
114	<hr/> <hr/> <hr/>	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
115	<hr/> <hr/> <hr/>	\$ 123,026.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
116	<hr/> <hr/> <hr/>	\$ 123,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
117	<hr/> <hr/> <hr/>	\$ 122,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
118	<hr/> <hr/> <hr/>	\$ 115,284.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
119	<hr/> <hr/> <hr/>	\$ 115,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
120	<hr/> <hr/> <hr/>	\$ 115,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
121	<hr/> <hr/> <hr/>	\$ 115,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
122	<hr/> <hr/> <hr/>	\$ 115,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
123	<hr/> <hr/> <hr/>	\$ 112,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
124	<hr/> <hr/> <hr/>	\$ 104,517.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
125	<hr/> <hr/> <hr/>	\$ 100,411.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
126	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
127	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
128	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
129	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
130	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
131	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
132	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
133	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
134	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
135	<hr/> <hr/> <hr/>	\$ 93,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
136	<hr/> <hr/> <hr/>	\$ 90,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
137	<hr/> <hr/> <hr/>	\$ 85,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
138	<hr/> <hr/> <hr/>	\$ 81,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
139	<hr/> <hr/> <hr/>	\$ 80,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
140	<hr/> <hr/> <hr/>	\$ 80,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
141	<hr/> <hr/> <hr/>	\$ 78,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
142	<hr/> <hr/> <hr/>	\$ 77,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
143	<hr/> <hr/> <hr/>	\$ 75,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
144	<hr/> <hr/> <hr/>	\$ 75,378.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
145	<hr/> <hr/> <hr/>	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
146	<hr/> <hr/> <hr/>	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
147	<hr/> <hr/> <hr/>	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
148	<hr/> <hr/> <hr/>	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
149	<hr/> <hr/> <hr/>	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
150	<hr/> <hr/> <hr/>	\$ 72,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
151	<hr/> <hr/> <hr/>	\$ <u>72,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
152	<hr/> <hr/> <hr/>	\$ <u>72,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
153	<hr/> <hr/> <hr/>	\$ <u>72,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
154	<hr/> <hr/> <hr/>	\$ <u>72,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
155	<hr/> <hr/> <hr/>	\$ <u>72,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
156	<hr/> <hr/> <hr/>	\$ <u>72,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
157	<hr/> <hr/> <hr/>	\$ 70,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
158	<hr/> <hr/> <hr/>	\$ 66,367.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
159	<hr/> <hr/> <hr/>	\$ 63,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
160	<hr/> <hr/> <hr/>	\$ 62,116.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
161	<hr/> <hr/> <hr/>	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
162	<hr/> <hr/> <hr/>	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
163	<hr/> <hr/> <hr/>	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
164	<hr/> <hr/> <hr/>	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
165	<hr/> <hr/> <hr/>	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
166	<hr/> <hr/> <hr/>	\$ 56,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
167	<hr/> <hr/> <hr/>	\$ 55,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
168	<hr/> <hr/> <hr/>	\$ 55,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
169	<hr/> <hr/> <hr/>	\$ 53,910.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
170	<hr/> <hr/> <hr/>	\$ 53,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
171	<hr/> <hr/> <hr/>	\$ 52,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
172	<hr/> <hr/> <hr/>	\$ 51,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
173	<hr/> <hr/> <hr/>	\$ 50,523.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
174	<hr/> <hr/> <hr/>	\$ 50,246.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
175	<hr/> <hr/> <hr/>	\$ 50,100.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
176	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
177	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
178	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
179	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
180	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
181	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
182	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
183	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input type="checkbox"/> Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
184	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
185	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
186	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
187	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
188	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
189	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
190	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
191	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
192	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
193	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
194	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
195	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
196	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
197	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
198	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
199	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
200	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
201	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
202	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
203	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
204	<hr/> <hr/> <hr/>	\$ 49,044.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
205	<hr/> <hr/> <hr/>	\$ 48,498.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
206	<hr/> <hr/> <hr/>	\$ 45,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
207	<hr/> <hr/> <hr/>	\$ 43,972.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
208	<hr/> <hr/> <hr/>	\$ 43,254.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
209	<hr/> <hr/> <hr/>	\$ 42,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
210	<hr/> <hr/> <hr/>	\$ 41,953.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
211	<hr/> <hr/> <hr/>	\$ 40,921.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
212	<hr/> <hr/> <hr/>	\$ 40,708.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
213	<hr/> <hr/> <hr/>	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
214	<hr/> <hr/> <hr/>	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
215	<hr/> <hr/> <hr/>	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
216	<hr/> <hr/> <hr/>	\$ 38,861.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
217	<hr/> <hr/> <hr/>	\$ 37,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
218	<hr/> <hr/> <hr/>	\$ 37,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
219	<hr/> <hr/> <hr/>	\$ 36,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
220	<hr/> <hr/> <hr/>	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
221	<hr/> <hr/> <hr/>	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
222	<hr/> <hr/> <hr/>	\$ 32,865.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
223	 <hr/> <hr/> <hr/>	\$ <u>32,839.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
224	 <hr/> <hr/> <hr/>	\$ <u>32,596.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
225	 <hr/> <hr/> <hr/>	\$ <u>32,027.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
226	 <hr/> <hr/> <hr/>	\$ <u>31,400.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
227	 <hr/> <hr/> <hr/>	\$ <u>30,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
228	 <hr/> <hr/> <hr/>	\$ <u>30,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
229	<hr/> <hr/> <hr/>	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
230	<hr/> <hr/> <hr/>	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
231	<hr/> <hr/> <hr/>	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
232	<hr/> <hr/> <hr/>	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
233	<hr/> <hr/> <hr/>	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
234	<hr/> <hr/> <hr/>	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
235	<hr/> <hr/> <hr/>	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
236	<hr/> <hr/> <hr/>	\$ 29,518.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
237	<hr/> <hr/> <hr/>	\$ 29,175.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
238	<hr/> <hr/> <hr/>	\$ 29,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
239	<hr/> <hr/> <hr/>	\$ 28,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
240	<hr/> <hr/> <hr/>	\$ 27,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
241	<hr/> <hr/> <hr/>	\$ 27,331.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
242	<hr/> <hr/> <hr/>	\$ 26,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
243	<hr/> <hr/> <hr/>	\$ 26,475.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
244	<hr/> <hr/> <hr/>	\$ 26,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
245	<hr/> <hr/> <hr/>	\$ 25,906.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
246	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
247	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
248	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
249	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
250	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
251	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
252	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
253	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
254	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
255	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
256	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
257	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
258	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
259	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
260	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
261	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
262	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
263	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
264	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
265	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
266	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
267	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
268	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
269	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
270	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
271	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
272	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
273	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
274	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
275	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
276	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
277	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
278	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
279	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
280	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
281	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
282	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
283	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
284	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
285	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
286	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
287	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
288	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
289	_____ _____ _____	\$ 24,776.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
290	_____ _____ _____	\$ 24,485.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
291	_____ _____ _____	\$ 21,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
292	_____ _____ _____	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
293	_____ _____ _____	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
294	_____ _____ _____	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
295	<hr/> <hr/> <hr/>	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
296	<hr/> <hr/> <hr/>	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
297	<hr/> <hr/> <hr/>	\$ 18,809.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
298	<hr/> <hr/> <hr/>	\$ 18,653.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
299	<hr/> <hr/> <hr/>	\$ 18,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
300	<hr/> <hr/> <hr/>	\$ 18,381.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
301	<hr/> <hr/> <hr/>	\$ 18,138.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
302	<hr/> <hr/> <hr/>	\$ 18,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
303	<hr/> <hr/> <hr/>	\$ 18,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
304	<hr/> <hr/> <hr/>	\$ 18,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
305	<hr/> <hr/> <hr/>	\$ 18,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
306	<hr/> <hr/> <hr/>	\$ 18,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
307	<hr/> <hr/> <hr/>	\$ 18,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
308	<hr/> <hr/> <hr/>	\$ 17,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
309	<hr/> <hr/> <hr/>	\$ 17,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
310	<hr/> <hr/> <hr/>	\$ 17,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
311	<hr/> <hr/> <hr/>	\$ 17,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
312	<hr/> <hr/> <hr/>	\$ 17,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
313	 	\$ 17,087.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
314	 	\$ 17,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
315	 	\$ 16,050.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
316	 	\$ 16,025.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
317	 	\$ 16,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
318	 	\$ 15,640.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
319	<hr/> <hr/> <hr/>	\$ 15,080.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
320	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
321	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
322	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
323	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
324	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
325	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
326	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
327	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
328	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
329	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
330	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
331	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
332	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
333	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
334	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
335	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
336	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
337	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
338	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
339	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
340	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
341	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
342	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
343	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
344	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
345	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
346	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
347	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
348	_____ _____ _____	\$ _____ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
349	_____ _____ _____	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
350	_____ _____ _____	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
351	_____ _____ _____	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
352	_____ _____ _____	\$ 14,101.	Person <input type="checkbox"/> Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
353	_____ _____ _____	\$ 13,920.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
354	_____ _____ _____	\$ 13,878.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
355	<hr/> <hr/> <hr/>	\$ 13,624.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
356	<hr/> <hr/> <hr/>	\$ 12,954.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
357	<hr/> <hr/> <hr/>	\$ 12,954.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
358	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
359	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
360	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
361	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
362	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
363	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
364	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
365	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
366	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
367	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
368	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
369	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
370	<hr/> <hr/> <hr/>	\$ 12,476.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
371	<hr/> <hr/> <hr/>	\$ 12,471.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
372	<hr/> <hr/> <hr/>	\$ 12,356.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
373	<hr/> <hr/> <hr/>	\$ 12,350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
374	<hr/> <hr/> <hr/>	\$ 11,790.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
375	<hr/> <hr/> <hr/>	\$ 11,708.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
376	<hr/> <hr/> <hr/>	\$ 11,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
377	<hr/> <hr/> <hr/>	\$ 10,720.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
378	<hr/> <hr/> <hr/>	\$ 10,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
379	<hr/> <hr/> <hr/>	\$ 10,453.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
380	<hr/> <hr/> <hr/>	\$ 10,453.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
381	<hr/> <hr/> <hr/>	\$ 10,453.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
382	<hr/> <hr/> <hr/>	\$ 10,453.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
383	<hr/> <hr/> <hr/>	\$ 10,363.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
384	<hr/> <hr/> <hr/>	\$ 10,363.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
385	<hr/> <hr/> <hr/>	\$ 10,363.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
386	<hr/> <hr/> <hr/>	\$ 10,182.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
387	<hr/> <hr/> <hr/>	\$ 10,143.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
388	<hr/> <hr/> <hr/>	\$ 10,100.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
389	<hr/> <hr/> <hr/>	\$ 10,100.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
390	<hr/> <hr/> <hr/>	\$ 10,051.	Person <input type="checkbox"/> Payroll Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
391	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
392	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
393	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
394	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
395	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
396	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
397	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
398	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
399	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
400	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
401	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
402	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
403	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
404	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
405	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
406	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
407	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
408	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
409	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
410	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
411	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
412	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
413	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
414	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
415	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
416	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
417	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
418	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
419	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
420	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
421	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
422	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
423	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
424	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
425	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
426	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
427	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
428	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
429	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
430	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
431	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
432	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
433	_____ _____ _____	\$ _____ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
434	_____ _____ _____	\$ _____ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
435	_____ _____ _____	\$ _____ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
436	_____ _____ _____	\$ _____ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
437	_____ _____ _____	\$ _____ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
438	_____ _____ _____	\$ _____ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
439	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
440	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
441	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
442	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
443	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
444	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
445	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
446	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
447	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
448	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
449	<hr/> <hr/> <hr/>	\$ 9,875.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
450	<hr/> <hr/> <hr/>	\$ 8,882.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
451	<hr/> <hr/> <hr/>	\$ 8,044.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
452	<hr/> <hr/> <hr/>	\$ 7,772.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
453	<hr/> <hr/> <hr/>	\$ 7,759.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
454	<hr/> <hr/> <hr/>	\$ 7,550.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
455	<hr/> <hr/> <hr/>	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
456	<hr/> <hr/> <hr/>	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
457	<hr/> <hr/> <hr/>	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
458	<hr/> <hr/> <hr/>	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
459	<hr/> <hr/> <hr/>	\$ 7,149.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
460	<hr/> <hr/> <hr/>	\$ 6,991.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
461	<hr/> <hr/> <hr/>	\$ 6,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
462	<hr/> <hr/> <hr/>	\$ 6,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
463	<hr/> <hr/> <hr/>	\$ 6,218.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
464	<hr/> <hr/> <hr/>	\$ 6,218.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
465	<hr/> <hr/> <hr/>	\$ 6,218.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
466	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
467	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
468	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
469	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
470	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
471	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
472	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
473	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
474	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
475	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
476	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
477	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
478	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
479	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
480	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
481	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
482	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
483	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
484	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
485	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
486	<hr/> <hr/> <hr/>	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
487	<hr/> <hr/> <hr/>	\$ 5,851.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
488	<hr/> <hr/> <hr/>	\$ 5,588.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
489	<hr/> <hr/> <hr/>	\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
490	<hr/> <hr/> <hr/>	\$ 5,335.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
491	<hr/> <hr/> <hr/>	\$ 5,230.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
492	<hr/> <hr/> <hr/>	\$ 5,227.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
493	 <hr/> <hr/> <hr/>	\$ <u>5,227.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
494	 <hr/> <hr/> <hr/>	\$ <u>5,227.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
495	 <hr/> <hr/> <hr/>	\$ <u>5,225.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
496	 <hr/> <hr/> <hr/>	\$ <u>5,182.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
497	 <hr/> <hr/> <hr/>	\$ <u>5,182.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
498	 <hr/> <hr/> <hr/>	\$ <u>5,182.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
499	 <hr/> <hr/> <hr/>	\$ <u>5,182.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
500	 <hr/> <hr/> <hr/>	\$ <u>5,182.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
501	 <hr/> <hr/> <hr/>	\$ <u>5,125.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
502	 <hr/> <hr/> <hr/>	\$ <u>5,114.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
503	 <hr/> <hr/> <hr/>	\$ <u>5,078.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
504	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
505	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
506	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
507	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
508	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
509	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
510	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
511	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
512	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
513	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
514	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
515	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
516	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
517	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
518	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
519	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
520	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
521	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
522	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
523	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
524	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
525	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
526	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
527	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
528	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
529	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
530	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
531	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
532	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
533	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
534	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
535	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
536	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
537	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
538	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
539	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
540	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
541	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
542	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
543	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
544	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
545	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
546	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
547	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
548	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
549	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
550	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
551	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
552	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
553	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
554	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
 <hr/> <hr/> <hr/>	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
 <hr/> <hr/> <hr/>	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
 <hr/> <hr/> <hr/>	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
 <hr/> <hr/> <hr/>	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
 <hr/> <hr/> <hr/>	 <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
8	2,182 TAIWAN SEMICONDUCTOR SPONS ADR SHARES, 340 BROADCOM INC SHARES <hr/> <hr/>	\$ 524,144.	12/31/24
14	2,398 AMAZON.COM INC. SHARES <hr/> <hr/>	\$ 426,832.	03/14/24
88	923 APPLE INC SHARES <hr/> <hr/>	\$ 203,328.	07/03/24
183	SEE STATEMENT 1 <hr/> <hr/>	\$ 50,000.	11/14/24
223	21 VANGUARD INFO TECH ETF SHARES, 34 NVIDIA CORP SHARES <hr/> <hr/>	\$ 32,839.	05/08/24
289	365 AMERICAN GRW FD OF AMER-F2 SHARES <hr/> <hr/>	\$ 24,776.	04/18/24

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
290	264 FIVE BELOW SHARES _____ _____ _____	\$ 24,485.	11/05/24
296	63 AMAZON.COM INC SHARES, 2 NETFLIX SHARES, 1 BERKSHIRE HATHAWAY INC-CL B SHARES _____ _____ _____	\$ 14,146.	11/04/24
301	43 MICROSOFT CORP SHARES _____ _____ _____	\$ 18,138.	04/10/24
352	24 SPDR S&P 500 ETF TRUST SHARES _____ _____ _____	\$ 14,101.	11/19/24
390	18 ROPER TECHNOLOGIES INC SHARES _____ _____ _____	\$ 10,051.	09/23/24
503	32 TENET HEALTHCARE CORP SHARES _____ _____ _____	\$ 5,078.	10/03/24

Name of organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

38 APPLE INC SHARES, 20 HOME DEPOT INC SHARES, 25 AIR PRODUCTS & CHEMICALS INC
SHARES, 29 UNION PAC CORP SHARES, 12 MOTOROLA SOLUTIONS INC SHARES, 33
BROADCOM INC SHARES, 15 EATON CORP PLC SHARES, 6 CME GROUP INC SHARES

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <p style="text-align:center;">BOYS & GIRLS CLUBS OF AMERICA</p>	Employer identification number (EIN) <p style="text-align:center;">13-5562976</p>
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures \$ _____
- 3 Volunteer hours for political campaign activities _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">IF the amount on line 1e, column (a) or (b), is:</th> <th>THEN the lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:	not over \$500,000	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000	\$1,000,000.		
IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:													
not over \$500,000	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation... a Volunteers? b Paid staff or management... c Media advertisements? d Mailings to members... e Publications... f Grants to other organizations... g Direct contact with legislators... h Rallies, demonstrations... i Other activities? j Total... 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

Table with 3 columns: Question, Yes, No. Rows include: 1 Dues, assessments, and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid): a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES: FEDERAL LOBBYING PAYMENTS, STATE LOBBYING PAYMENTS, GOVERNMENT RELATIONS DEPT COSTS.

SCHEDULE D
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

BOYS & GIRLS CLUBS OF AMERICA

Employer identification number

13-5562976

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------------|-------------|
| c Beginning balance | 4,350,000. |
| d Additions during the year | 20,750,000. |
| e Distributions during the year | 19,221,320. |
| f Ending balance | 5,878,680. |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	0.	0.	0.	259,396,282.	233,455,756.
b Contributions					9,988,326.
c Net investment earnings, gains, and losses					30,439,789.
d Grants or scholarships					1,145,118.
e Other expenditures for facilities and programs				259,396,282.	13,342,471.
f Administrative expenses					
g End of year balance					259,396,282.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations? | | |
| (ii) Related organizations? | | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		15,041,962.	12,146,573.	2,895,389.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				2,895,389.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) SPLIT INTEREST AGREEMENTS	2,839,826.
(2) OPERATING LEASE - ROU ASSETS	2,963,389.
(3) OTHER ASSETS	4,756,994.
(4) DEFERRED COMPENSATION	2,379,839.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	12,940,048.

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE ANNUITIES PAYABLE	2,633,053.
(3) DEFERRED COMP AGREEMENTS 457(B)	2,379,839.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	5,012,892.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART IV, LINE 1B:

BGCA HAS A CUSTODIAL ARRANGEMENT WITH 3 STATE ALLIANCES WHERE BGCA INVESTS THE MONEY ON BEHALF OF THE ALLIANCES IN ORDER TO EARN MONTHLY INTEREST. THE ALLIANCES WILL REQUEST DISBURSEMENTS AS THEY SEE FIT.

PART X, LINE 2:

BGCA IS RECOGNIZED AS AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE (THE CODE) AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) WHEREBY ONLY UNRELATED BUSINESS INCOME, AS DEFINED BY SECTION 512(A)(1) OF THE CODE, IS SUBJECT TO FEDERAL INCOME TAX. DURING 2024 AND 2023, \$224,330 AND \$168,080, RESPECTIVELY, WAS PAID FOR INCOME TAXES. MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THE ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THE INCOME TAXES TOPIC OF THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ACCOUNTING STANDARDS CODIFICATION ("ASC").

BGCA'S SUBSIDIARY ALLIANCE ORGANIZATIONS ARE EXEMPT FROM FEDERAL INCOME TAXES UNDER EITHER SECTION 501(C)(4) OR SECTION 501(C)(3) OF THE CODE.

**SCHEDULE G
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization: **BOYS & GIRLS CLUBS OF AMERICA**
Employer identification number: **13-5562976**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of nongovernment grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
PRODUCTION SOLUTIONS - 1953 GALLOWS ROAD, SUITE 500, RUE CLAIR DBA SL DIGITAL - 13396 LAFAYETTE WAY,	DIRECT MARKETING	X		2,057,014.	0.	2,057,014.
	DIRECT MARKETING		X	893,087.	0.	893,087.
Total				2,950,101.		2,950,101.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO
MT, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WV, WA, WI

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		NAT'L YOY DINNER (event type)	PAC YOY GALA (event type)	8 (total number)		
Revenue	1	Gross receipts	3,339,557.	1,768,246.	5,043,351.	10,151,154.
	2	Less: Contributions	3,166,807.	1,673,496.	4,120,358.	8,960,661.
	3	Gross income (line 1 minus line 2)	172,750.	94,750.	922,993.	1,190,493.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	507,161.	219,145.	750,096.	1,476,402.
	7	Food and beverages				
	8	Entertainment	127,091.	117,878.	540,283.	785,252.
	9	Other direct expenses	125,351.	32,575.	792,977.	950,903.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				3,212,557.
11	Net income summary. Subtract line 10 from line 3, column (d)				-2,022,064.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____

c If "Yes," enter the name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: PRODUCTION SOLUTIONS

(I) ADDRESS OF FUNDRAISER: 1953 GALLOWS ROAD, SUITE 500, VIENNA, VA 22182

(I) NAME OF FUNDRAISER: RUE CLAIR DBA SL DIGITAL

(I) ADDRESS OF FUNDRAISER: 13396 LAFAYETTE WAY, THORNTON, CO 80241

**SCHEDULE I
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **BOYS & GIRLS CLUBS OF AMERICA** Employer identification number **13-5562976**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
B&GCS OF METRO ATLANTA 1275 PEACHTREE ST NE, SUITE 500 ATLANTA, GA 30309-3580	58-0566123	501(C)(3)	2,704,861.	0.			GENERAL SUPPORT
B&GCS OF GREATER DALLAS 4816 WORTH ST DALLAS, TX 75246-1154	75-1152657	501(C)(3)	2,083,957.	0.			GENERAL SUPPORT
B&GC OF ST JOSEPH COUNTY 502 E SAMPLE ST SOUTH BEND, IN 46601-3551	35-1329625	501(C)(3)	1,432,514.	0.			GENERAL SUPPORT
B&GCS OF THE LOS ANGELES HARBOR 1200 S CABRILLO AVE SAN PEDRO, CA 90731-4011	95-1661682	501(C)(3)	1,308,954.	0.			GENERAL SUPPORT
B&GC OF GREATER MILWAUKEE 1558 NORTH 6TH ST MILWAUKEE, WI 53212-3845	39-0806292	501(C)(3)	1,269,151.	0.			GENERAL SUPPORT
B&GC OF GREATER HOUSTON 815 CROSBY ST HOUSTON, TX 77019-3054	76-0270942	501(C)(3)	1,195,006.	0.			GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 797.

3 Enter total number of other organizations listed in the line 1 table 0.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (Rev. 12-2024)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF WHITTIER 7905 GREENLEAF AVE WHITTIER, CA 90602-2188	95-6151763	501(C)(3)	1,171,683.	0.			GENERAL SUPPORT
B&GCS OF SANTA MONICA 1220 LINCOLN BLVD SANTA MONICA, CA 90401-1704	95-1890706	501(C)(3)	1,062,018.	0.			GENERAL SUPPORT
B&GCS OF GREATER NORTHWEST INDIANA (PORTER COUNTY) - 3691 WILLOWCREEK RD, SUITE 200 - PORTAGE, IN 46368-5076	35-1262439	501(C)(3)	1,056,791.	0.			GENERAL SUPPORT
B&GC OF ELKHART COUNTY, INC-B&GC OF GREATER GOSHEN - 102 W LINCOLN AVE, STE 240 - GOSHEN, IN 46526-3225	35-1033735	501(C)(3)	1,015,175.	0.			GENERAL SUPPORT
B&GCS OF MT. VERNON 350 S 6TH AVE MOUNT VERNON, NY 10550-4114	13-1739925	501(C)(3)	1,006,940.	0.			GENERAL SUPPORT
B&GC OF BLOOMINGTON 311 SOUTH LINCOLN BLOOMINGTON, IN 47401-3519	35-0997525	501(C)(3)	981,496.	0.			GENERAL SUPPORT
B&GC OF THE EAST VALLEY 2602 W BASELINE RD, #25 MESA, AZ 85202-5461	86-0550646	501(C)(3)	959,077.	0.			GENERAL SUPPORT
B&GCS OF GREATER FORT WORTH 3218 E BELKNAP ST FORT WORTH, TX 76111-4739	75-0808785	501(C)(3)	867,351.	0.			GENERAL SUPPORT
THE B&GC OF BURBANK AND GREATER EAST VALLEY, INC. - 2244 N BUENA VISTA ST - BURBANK, CA 91504-3308	95-4485745	501(C)(3)	846,835.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GCS OF SOUTHCENTRAL ALASKA 2300 W 36TH AVE ANCHORAGE, AK 99517-2557	92-0036082	501(C)(3)	796,108.	0.			GENERAL SUPPORT
B&GC OF MICHIGAN CITY 321 DETROIT ST MICHIGAN CITY, IN 46360-3717	35-1992851	501(C)(3)	784,004.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL FLORIDA 101 E COLONIAL DR ORLANDO, FL 32801-1201	59-0951887	501(C)(3)	761,211.	0.			GENERAL SUPPORT
B&GCS OF LONG BEACH 3635 LONG BEACH BLVD LONG BEACH, CA 90807-4018	95-1643977	501(C)(3)	759,965.	0.			GENERAL SUPPORT
B&GC OF PASADENA 3230 E DEL MAR BLVD PASADENA, CA 91107-4693	95-1643305	501(C)(3)	758,019.	0.			GENERAL SUPPORT
B&GCS OF INDIANAPOLIS 3909 N MERIDIAN ST, SUITE 100 INDIANAPOLIS, IN 46208-4011	35-0888754	501(C)(3)	751,344.	0.			GENERAL SUPPORT
ANTELOPE VALLEY B&GC 815 E AVENUE Q6 PALMDALE, CA 93550-4715	95-4290055	501(C)(3)	741,293.	0.			GENERAL SUPPORT
B&GCS OF LAS VEGAS 2850 LINDELL RD LAS VEGAS, NV 89146-6815	88-0093150	501(C)(3)	709,973.	0.			GENERAL SUPPORT
B&GCS OF THE TWIN CITIES 690 JACKSON ST SAINT PAUL, MN 55130-4345	41-0842657	501(C)(3)	686,351.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF HAWAII 1000 BISHOP ST, SUITE 505 HONOLULU, HI 96813-4202	99-6005407	501(C)(3)	675,678.	0.			GENERAL SUPPORT
B&GCS OF NORTHEAST FLORIDA 555 W 25TH ST JACKSONVILLE, FL 32206-1809	59-6167630	501(C)(3)	673,849.	0.			GENERAL SUPPORT
B&GCS OF SNOHOMISH COUNTY 8223 BROADWAY, SUITE 100 EVERETT, WA 98203-6874	91-0549511	501(C)(3)	671,891.	0.			GENERAL SUPPORT
B&GCS OF PHILADELPHIA 1518 WALNUT ST, STE 712 PHILADELPHIA, PA 19102-3419	23-1966756	501(C)(3)	660,055.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF MARSHALL COUNTY - 314 E JEFFERSON ST - PLYMOUTH, IN 46563-1826	35-1955489	501(C)(3)	625,877.	0.			GENERAL SUPPORT
B&GCS OF GREATER BATON ROUGE 8281 GOODWOOD BLVD, STE A BATON ROUGE, LA 70806-7742	72-0928014	501(C)(3)	605,937.	0.			GENERAL SUPPORT
B&GCS OF GREATER WASHINGTON 4103 BENNING RD NE WASHINGTON, DC 20019-3423	53-0236759	501(C)(3)	597,513.	0.			GENERAL SUPPORT
B&GC OF EVANSVILLE 700 BELLEMEADE AVE EVANSVILLE, IN 47710-1231	35-1007558	501(C)(3)	590,748.	0.			GENERAL SUPPORT
VARIETY B&GC 2530 CINCINNATI ST LOS ANGELES, CA 90033-3014	95-1919219	501(C)(3)	588,163.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF TRUCKEE MEADOWS 2680 E 9TH ST RENO, NV 89512-3231	88-0142068	501(C)(3)	568,596.	0.			GENERAL SUPPORT
B&GC OF HUNTINGTON COUNTY 608 E. STATE STREET HUNTINGTON, IN 46750-2923	35-2094506	501(C)(3)	563,394.	0.			GENERAL SUPPORT
B&GC OF METRO LOS ANGELES 800 S FIGUEROA ST, SUITE 950 LOS ANGELES, CA 90017-2521	81-0851473	501(C)(3)	560,741.	0.			GENERAL SUPPORT
B&GC OF SEYMOUR 950 N OBRIEN ST SEYMOUR, IN 47274-1859	35-0909245	501(C)(3)	555,043.	0.			GENERAL SUPPORT
B&GCS OF KING COUNTY 603 STEWART ST, STE 300 SEATTLE, WA 98101-1263	91-0532600	501(C)(3)	543,503.	0.			GENERAL SUPPORT
B&GCS OF WAYNE COUNTY INDIANA 1717 S L ST RICHMOND, IN 47374-7400	35-1065715	501(C)(3)	529,619.	0.			GENERAL SUPPORT
B&GC OF FORT WAYNE 2609 FAIRFIELD AVE FORT WAYNE, IN 46807-1214	35-1778767	501(C)(3)	520,444.	0.			GENERAL SUPPORT
B&GC OF MCALLEN 2620 W GALVESTON AVE MCALLEN, TX 78501-7774	74-1553646	501(C)(3)	515,323.	0.			GENERAL SUPPORT
B&GCS OF CHICAGO 2102 W MONROE ST CHICAGO, IL 60612-3015	36-2166997	501(C)(3)	511,936.	0.			GENERAL SUPPORT

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B&GCS OF METRO DENVER 2017 W 9TH AVE DENVER, CO 80204-3845	84-0510404	501(C)(3)	507,288.	0.			GENERAL SUPPORT
B&GC OF TAHLEQUAH, OKLAHOMA 400 W MORGAN ST TAHLEQUAH, OK 74464-2626	73-1505432	501(C)(3)	507,048.	0.			GENERAL SUPPORT
B&GCS OF PALM BEACH COUNTY 800 NORTHPOINT PKWY, STE 204 WEST PALM BEACH, FL 33407-1978	23-7060561	501(C)(3)	506,086.	0.			GENERAL SUPPORT
B&GC OF WEST SAN GABRIEL VALLEY 328 S RAMONA AVE MONTEREY PARK, CA 91754-3312	95-2782501	501(C)(3)	501,864.	0.			GENERAL SUPPORT
B&GCS OF PORTLAND METROPOLITAN AREA - 8203 SE 7TH AVE, STE 100 - PORTLAND, OR 97202-6588	93-0474800	501(C)(3)	500,161.	0.			GENERAL SUPPORT
B&GCS OF NORTH ALABAMA 203 EASTSIDE SQUARE HUNTSVILLE, AL 35801-4802	63-0360026	501(C)(3)	489,555.	0.			GENERAL SUPPORT
MUNCIE B&GC 1710 S MADISON ST MUNCIE, IN 47302-3473	35-0869060	501(C)(3)	484,612.	0.			GENERAL SUPPORT
B&GCS OF SAINT LUCIE COUNTY 3104 AVENUE J FORT PIERCE, FL 34947-2412	65-0505369	501(C)(3)	482,094.	0.			GENERAL SUPPORT
B&GC OF SAN FERNANDO VALLEY 11251 GLENOAKS BLVD PACOIMA, CA 91331-1621	95-2468448	501(C)(3)	479,078.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GC OF DURANT 415 N 5TH AVE DURANT, OK 74701	27-2922456	501(C)(3)	471,227.	0.			GENERAL SUPPORT
B&GC OF DELAWARE COUNTY 1433 N MAIN ST JAY, OK 74346	73-1214669	501(C)(3)	469,651.	0.			GENERAL SUPPORT
B&GCS OF BROWARD COUNTY 877 NW 61ST ST FORT LAUDERDALE, FL 33309-2022	59-1108790	501(C)(3)	462,723.	0.			GENERAL SUPPORT
B&GC OF METROPOLITAN BALTIMORE 1201 S SHARP ST, SUITE 302 BALTIMORE, MD 21230-3702	26-4371125	501(C)(3)	455,923.	0.			GENERAL SUPPORT
B&GC OF MAUI 100 KANALOA AVE KAHULUI, HI 96732-1116	99-0272347	501(C)(3)	448,900.	0.			GENERAL SUPPORT
B&GCS OF MIDDLE TENNESSEE 1704 CHARLOTTE AVE, SUITE 200 NASHVILLE, TN 37203-2972	62-0540402	501(C)(3)	444,970.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL TEXAS, INC. 703 N 8TH ST KILLEEN, TX 76541	26-2132885	501(C)(3)	443,218.	0.			GENERAL SUPPORT
B&GCS OF GREATER SCOTTSDALE 10533 E LAKEVIEW DR SCOTTSDALE, AZ 85258-4965	86-0133718	501(C)(3)	435,873.	0.			GENERAL SUPPORT
B&GCS OF GREATER KANSAS CITY 4001 BLUE PKWY, SUITE 102 KANSAS CITY, MO 64130-2349	43-6072065	501(C)(3)	434,742.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GCS OF SAN ANTONIO 123 RALPH AVE SAN ANTONIO, TX 78204-2465	74-1109637	501(C)(3)	431,840.	0.			GENERAL SUPPORT
CHILDREN'S AID SOCIETY 117 W 124TH ST NEW YORK, NY 10027-4920	13-5562191	501(C)(3)	430,522.	0.			GENERAL SUPPORT
B&GCS OF THE TENNESSEE VALLEY 967 IRWIN ST KNOXVILLE, TN 37917-6634	62-0475743	501(C)(3)	429,961.	0.			GENERAL SUPPORT
B&GCS OF KERN COUNTY 801 NILES ST BAKERSFIELD, CA 93305-4419	95-2462246	501(C)(3)	429,852.	0.			GENERAL SUPPORT
LOS ANGELES B&GC 2635 PASADENA AVE LOS ANGELES, CA 90031-2323	23-7304197	501(C)(3)	423,700.	0.			GENERAL SUPPORT
B&GC OF ZIONSVILLE 1575 MULBERRY ST ZIONSVILLE, IN 46077-1146	35-1750659	501(C)(3)	421,102.	0.			GENERAL SUPPORT
B&GC OF LORAIN COUNTY 6114 BROADWAY AVE CLEVELAND, OH 44127-1740	34-1856214	501(C)(3)	420,367.	0.			GENERAL SUPPORT
B&GCS OF ACADIANA 1405 W PINHOOK RD, STE 108 LAFAYETTE, LA 70503-3100	72-0940072	501(C)(3)	419,653.	0.			GENERAL SUPPORT
B&GC OF FRANKLIN 103 S COURT ST FRANKLIN, KY 42134-2117	61-1423661	501(C)(3)	419,370.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GCS OF GREATER ST. LOUIS, INC. 2901 N GRAND BLVD SAINT LOUIS, MO 63107-2608	43-6061693	501(C)(3)	418,423.	0.			GENERAL SUPPORT
B&GC OF LAWRENCE COUNTY 2009 19TH ST BEDFORD, IN 47421-4066	30-0759844	501(C)(3)	417,441.	0.			GENERAL SUPPORT
B&GC OF CARSON 1950 E 220TH ST, 207 CARSON, CA 90810-1649	33-0475452	501(C)(3)	416,562.	0.			GENERAL SUPPORT
B&GCS OF GREATER SAN DIEGO 4635 CLAIREMONT MESA BLVD SAN DIEGO, CA 92117-2004	95-1865988	501(C)(3)	413,149.	0.			GENERAL SUPPORT
B&GCS OF MIAMI 2805 SW 32ND AVE MIAMI, FL 33133-3431	59-0879227	501(C)(3)	407,563.	0.			GENERAL SUPPORT
B&GC OF TIPTON COUNTY 341 W JEFFERSON ST, STE B TIPTON, IN 46072-1862	35-1871264	501(C)(3)	395,531.	0.			GENERAL SUPPORT
B&GCS OF HALL COUNTY 1 POSITIVE PL GAINESVILLE, GA 30501-4631	58-0656890	501(C)(3)	392,069.	0.			GENERAL SUPPORT
B&GCS OF TAMPA BAY 1307 N MACDILL AVE TAMPA, FL 33607-5155	59-0624368	501(C)(3)	386,733.	0.			GENERAL SUPPORT
B&GCS OF THE EMERALD COAST 923 DENTON BLVD NW FORT WALTON BEACH, FL 32547-1603	59-1267050	501(C)(3)	376,787.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GCS OF CENTRAL SONOMA COUNTY 1400 N DUTTON AVE, SUITE 14 SANTA ROSA, CA 95401-4657	68-0309534	501(C)(3)	375,555.	0.			GENERAL SUPPORT
B&GCS OF DELAWARE 669 S UNION ST WILMINGTON, DE 19805-3852	51-0068712	501(C)(3)	370,939.	0.			GENERAL SUPPORT
B&GCS OF ROSEBUD 435 W 2ND ST MISSION, SD 57555-0112	46-0453641	501(C)(3)	365,616.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL ALABAMA 2380 OLD SPRINGVILLE RD BIRMINGHAM, AL 35215-4048	63-0302102	501(C)(3)	363,743.	0.			GENERAL SUPPORT
B&GCS OF TUCSON 3155 E GRANT RD TUCSON, AZ 85716-2857	86-0172257	501(C)(3)	360,176.	0.			GENERAL SUPPORT
UNION LEAGUE B&GCS 65 W JACKSON BLVD, FL 2 CHICAGO, IL 60604-3598	36-2167939	501(C)(3)	358,570.	0.			GENERAL SUPPORT
LYN TREECE B&GC OF TIPPECANOE COUNTY - 1529 N 10TH ST - LAFAYETTE, IN 47904-1356	35-1262269	501(C)(3)	352,610.	0.			GENERAL SUPPORT
B&GCS OF THE SUNCOAST 4625 E BAY DR, SUITE 103 CLEARWATER, FL 33764-5738	59-1566799	501(C)(3)	349,469.	0.			GENERAL SUPPORT
B&GCS OF GREATER CINCINNATI 600 DALTON AVE CINCINNATI, OH 45203-1282	31-0536965	501(C)(3)	348,822.	0.			GENERAL SUPPORT

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B&GCS OF SAN FRANCISCO 380 FULTON ST SAN FRANCISCO, CA 94102-4454	94-1156608	501(C)(3)	347,654.	0.			GENERAL SUPPORT
B&GCS OF WESTERN PENNSYLVANIA 33 TERMINAL WAY, 435 PITTSBURGH, PA 15219-1216	25-1206970	501(C)(3)	335,809.	0.			GENERAL SUPPORT
B&GCS OF FRESNO COUNTY 540 N AUGUSTA ST FRESNO, CA 93701-2352	94-1149171	501(C)(3)	333,035.	0.			GENERAL SUPPORT
B&GCS OF THE VIRGINIA PENINSULA 11825 ROCK LANDING DR, STE B CHESAPEAKE BLDG - NEWPORT NEWS, VA 23606-4236	54-0538202	501(C)(3)	332,740.	0.			GENERAL SUPPORT
B&GC FOX VALLEY 160 S BADGER AVE APPLETON, WI 54914-5228	39-1225709	501(C)(3)	332,344.	0.			GENERAL SUPPORT
B&GC OF FARMINGTON 1925 POSITIVE WAY FARMINGTON, NM 87401-2579	85-0161421	501(C)(3)	331,131.	0.			GENERAL SUPPORT
B&GC OF HARRISON COUNTY 600 E CHESTNUT ST CORYDON, IN 47112-1350	35-1983078	501(C)(3)	330,859.	0.			GENERAL SUPPORT
B&GC OF NORTHEAST TEXAS 4320 LEE ST GREENVILLE, TX 75401-3711	75-2174005	501(C)(3)	329,085.	0.			GENERAL SUPPORT
B&GC OF DANE COUNTY 1818 W BELTLINE HWY MADISON, WI 53713-2334	39-1925617	501(C)(3)	326,605.	0.			GENERAL SUPPORT

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J. KENNETH SELF SHELBYVILLE BOYS CLUB - 710 S MILLER ST - SHELBYVILLE, IN 46176-2406	35-0957039	501(C)(3)	325,241.	0.			GENERAL SUPPORT
B&GCS OF SOUTH VALLEY 179 E 5065 S MURRAY, UT 84107-4819	87-0304654	501(C)(3)	323,090.	0.			GENERAL SUPPORT
B&GC OF NOBLESVILLE 1700 CONNER ST NOBLESVILLE, IN 46060-3011	35-1054426	501(C)(3)	322,448.	0.			GENERAL SUPPORT
B&GCS OF SOUTHEASTERN MICHIGAN 26777 HALSTED RD FARMINGTON HILLS, MI 48331-3577	38-1387123	501(C)(3)	319,323.	0.			GENERAL SUPPORT
B&GC OF MORGAN COUNTY 31 INDIANAPOLIS RD MOORESVILLE, IN 46158-1431	36-4541410	501(C)(3)	313,172.	0.			GENERAL SUPPORT
HARFORD COUNTY B&GC 15 S PARKE ST ABERDEEN, MD 21001-4515	52-1701612	501(C)(3)	309,042.	0.			GENERAL SUPPORT
B&GC OF REDLANDS 1251 CLAY ST REDLANDS, CA 92374-3257	95-6187083	501(C)(3)	303,481.	0.			GENERAL SUPPORT
B&GC OF WHITE EARTH 35500 EAGLEVIEW RD OGEMA, MN 56569-9658	41-1737979	501(C)(3)	299,585.	0.			GENERAL SUPPORT
B&GC OF TABULA RASA 2930 KERRY FOREST PKWY, SUITE 101 TALLAHASSEE, FL 32309-7806	20-5421558	501(C)(3)	298,506.	0.			GENERAL SUPPORT

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B&GCS OF OAKLAND 3300 HIGH ST OAKLAND, CA 94619-1818	94-1279794	501(C)(3)	294,471.	0.			GENERAL SUPPORT
B&GCS OF GREATER SACRAMENTO 5212 LEMON HILL AVE SACRAMENTO, CA 95824-1528	68-0338324	501(C)(3)	293,699.	0.			GENERAL SUPPORT
WEST VALLEY B&GC 7245 REMMET AVE CANOGA PARK, CA 91303-1532	95-4419365	501(C)(3)	291,671.	0.			GENERAL SUPPORT
B&GCS OF VOLUSIA/FLAGLER COUNTIES 211 N RIDGEWOOD AVE EDGEWATER, FL 32132-1707	59-3158162	501(C)(3)	288,104.	0.			GENERAL SUPPORT
B&GC OF ADAIR COUNTY SCHOOLS 421 W PINE ST STILWELL, OK 74960-2227	90-0632014	501(C)(3)	287,177.	0.			GENERAL SUPPORT
B&GCS OF COLLIN COUNTY 7770 MAIN ST, SUITE E FRISCO, TX 75033	75-1296869	501(C)(3)	285,850.	0.			GENERAL SUPPORT
B&GC OF HANCOCK COUNTY 715 E LINCOLN ST. GREENFIELD, IN 46140-2179	35-0979327	501(C)(3)	285,816.	0.			GENERAL SUPPORT
B&GCS OF THE CENTRAL SAVANNAH RIVER AREA - 206 MILLEDGE RD - AUGUSTA, GA 30904-3040	58-0610382	501(C)(3)	282,827.	0.			GENERAL SUPPORT
B&GC OF ELGIN 1590 WILKENING RD SCHAUMBURG, IL 60173-5332	36-3832212	501(C)(3)	281,363.	0.			GENERAL SUPPORT

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B&GCS OF BUFFALO 282 BABCOCK ST BUFFALO, NY 14210-1541	16-0849516	501(C)(3)	278,388.	0.			GENERAL SUPPORT
B&GC OF UTAH COUNTY 1060 E 150 N PROVO, UT 84606-3505	87-0293260	501(C)(3)	278,174.	0.			GENERAL SUPPORT
WOODLAND B&GC W6719 WATER STREET NEOPIT, WI 54150	39-1423945	501(C)(3)	277,523.	0.			GENERAL SUPPORT
B&GC OF ADAMS COUNTY 410 WINCHESTER ST DECATUR, IN 46733-2055	35-1807774	501(C)(3)	275,211.	0.			GENERAL SUPPORT
B&GC OF THE CASA GRANDE VALLEY 1905 N PEART RD CASA GRANDE, AZ 85122-2494	86-0864429	501(C)(3)	274,442.	0.			GENERAL SUPPORT
B&GC OF THE FLATHEAD RESERVATION AND LAKE COUNTY - 62579 US HIGHWAY 93 - RONAN, MT 59864-2002	81-0515029	501(C)(3)	274,355.	0.			GENERAL SUPPORT
THE SALVATION ARMY, A GEORGIA CORPORATION - 1424 NORTHEAST EXPY NE - BROOKHAVEN, GA 30329-2018	58-0660607	501(C)(3)	270,821.	0.			GENERAL SUPPORT
B&GCS OF THE AUSTIN AREA 6648 ED BLUESTEIN BLVD AUSTIN, TX 78723-3933	74-6087356	501(C)(3)	270,575.	0.			GENERAL SUPPORT
B&GC OF ODESSA 800 E 13TH ST ODESSA, TX 79761-2732	75-0990952	501(C)(3)	269,673.	0.			GENERAL SUPPORT

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B&GCS OF TOLEDO 2250 N DETROIT AVE TOLEDO, OH 43606-4641	34-4427933	501(C)(3)	268,321.	0.			GENERAL SUPPORT
B&GCS OF THE SEQUOIAS 215 W TULARE AVE VISALIA, CA 93277-4813	77-0469369	501(C)(3)	267,304.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF RUSH COUNTY 1590 N SEXTON ST RUSHVILLE, IN 46173-2308	23-7170004	501(C)(3)	261,386.	0.			GENERAL SUPPORT
B&GCS OF THE CHATTAHOOCHEE VALLEY 1700 BUENA VISTA RD COLUMBUS, GA 31906-3003	58-1174393	501(C)(3)	259,395.	0.			GENERAL SUPPORT
B&GCS OF GREATER MEMPHIS 44 S REMBERT ST MEMPHIS, TN 38104-4004	62-0646371	501(C)(3)	259,154.	0.			GENERAL SUPPORT
B&GCS OF LEE COUNTY 7275 CONCOURSE DR, SITE 200 FORT MYERS, FL 33908-2895	59-2013870	501(C)(3)	256,778.	0.			GENERAL SUPPORT
B&GC OF GREEN BAY 1451 UNIVERSITY AVE GREEN BAY, WI 54302-1826	39-6102943	501(C)(3)	256,639.	0.			GENERAL SUPPORT
B&GCS OF THE NORTH VALLEY 601 WALL ST CHICO, CA 95928-5626	68-0294846	501(C)(3)	253,665.	0.			GENERAL SUPPORT
TERRE HAUTE BOYS & GIRLS CLUB 924 N 13TH ST TERRE HAUTE, IN 47807-1634	35-0868182	501(C)(3)	251,203.	0.			GENERAL SUPPORT

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B&GCS OF BELLEVUE 209 100TH AVE NE BELLEVUE, WA 98004-5625	91-0776451	501(C)(3)	250,773.	0.			GENERAL SUPPORT
B&GC OF EL PASO 801 S FLORENCE ST EL PASO, TX 79901-2925	74-1145974	501(C)(3)	250,383.	0.			GENERAL SUPPORT
B&GCS OF GREATER WATERVILLE 126 NORTH ST WATERVILLE, ME 04901-4954	01-0344605	501(C)(3)	248,127.	0.			GENERAL SUPPORT
B&GCS OF NEWARK 1 AVON AVE NEWARK, NJ 07108-2801	22-1515405	501(C)(3)	247,273.	0.			GENERAL SUPPORT
B&GCS OF COLUMBUS 1108 CITY PARK AVE, SUITE 301 COLUMBUS, OH 43206-3583	31-4387575	501(C)(3)	246,938.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL WYOMING 1701 E K ST CASPER, WY 82601-1552	23-7060727	501(C)(3)	245,540.	0.			GENERAL SUPPORT
B&GC OF MOSHOLU MONTEFIORE COMMUNITY CENTER - 3450 DEKALB AVE - BRONX, NY 10467-2302	20-8017249	501(C)(3)	245,260.	0.			GENERAL SUPPORT
B&GC OF NOWATA 300 S PINE ST NOWATA, OK 74048-3418	73-1569974	501(C)(3)	243,960.	0.			GENERAL SUPPORT
B&GCS OF GREATER OXNARD & PORT HUENEME - 1900 W 5TH ST - OXNARD, CA 93030-6596	95-1785162	501(C)(3)	243,273.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF GREATER GARDINER 14 PRAY ST GARDINER, ME 04345-1929	60-0001275	501(C)(3)	240,550.	0.			GENERAL SUPPORT
B&GCS OF ANNAPOLIS & ANNE ARUNDEL COUNTY - 121 SOUTH VILLA AVE - ANNAPOLIS, MD 21401-3634	52-1736346	501(C)(3)	238,661.	0.			GENERAL SUPPORT
MAVERICK B&GC OF AMARILLO 1923 S LINCOLN ST AMARILLO, TX 79109-2745	75-0808760	501(C)(3)	234,770.	0.			GENERAL SUPPORT
B&GC OF PHARR 1026 S FIR ST PHARR, TX 78577-6047	75-2258513	501(C)(3)	233,994.	0.			GENERAL SUPPORT
B&GCS OF PITT COUNTY 621 W FIRETOWER RD WINTERVILLE, NC 28590-9232	56-0927694	501(C)(3)	231,744.	0.			GENERAL SUPPORT
B&GCS OF GREATER LEE COUNTY 1365 GATEWOOD DR, #221 AUBURN, AL 36830-2834	58-1875904	501(C)(3)	231,654.	0.			GENERAL SUPPORT
B&GCS OF SILICON VALLEY 518 VALLEY WAY MILPITAS, CA 95035-4106	94-1294898	501(C)(3)	228,944.	0.			GENERAL SUPPORT
B&GCS OF GREATER GASTON 310 S BOYD ST GASTONIA, NC 28052-2012	56-1419498	501(C)(3)	227,884.	0.			GENERAL SUPPORT
B&GC OF MONTGOMERY COUNTY 1001 WHITLOCK AVE CRAWFORDSVILLE, IN 47933-1453	35-6007302	501(C)(3)	223,454.	0.			GENERAL SUPPORT

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B&GCS OF SARASOTA COUNTY BLDG 492 SARASOTA, FL 34237-5342	59-6211876	501(C)(3)	222,725.	0.			GENERAL SUPPORT
B&GC OF THE NORTHERN NECK 517 N MAIN ST KILMARNOCK, VA 22482	20-4887254	501(C)(3)	222,558.	0.			GENERAL SUPPORT
B&GCS OF PUEBLO COUNTY 635 W CORONA AVE, SUITE 105 PUEBLO, CO 81004-1242	23-7307508	501(C)(3)	222,419.	0.			GENERAL SUPPORT
KIPS BAY B&GC 1930 RANDALL AVE BRONX, NY 10473-2698	13-1623850	501(C)(3)	219,011.	0.			GENERAL SUPPORT
B&GCS OF PROVIDENCE 550 WICKENDEN ST PROVIDENCE, RI 02903-4438	05-0258929	501(C)(3)	218,831.	0.			GENERAL SUPPORT
B&GC OF ATLANTIC CITY 317 N PENNSYLVANIA AVE ATLANTIC CITY, NJ 08401-3222	23-7253748	501(C)(3)	218,225.	0.			GENERAL SUPPORT
B&GCS OF SAN DIEGUITO 533 LOMAS SANTA FE DRIVE SOLANA BEACH, CA 92075-1323	95-2470435	501(C)(3)	218,040.	0.			GENERAL SUPPORT
B&GC OF OTTAWA COUNTY 830 D ST SE MIAMI, OK 74354-8300	73-1352753	501(C)(3)	217,878.	0.			GENERAL SUPPORT
B&GC OF LAWRENCE 2910 HASKELL AVE LAWRENCE, KS 66046-4942	23-7296824	501(C)(3)	215,300.	0.			GENERAL SUPPORT

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LIDE WHITE MEMORIAL B&GC 1551 MSH NORTH GATE RD MADISON, IN 47250-2198	35-1143819	501(C)(3)	215,095.	0.			GENERAL SUPPORT
B&GC OF THE SOUTH COAST AREA 1304 CALLE VALLE SAN CLEMENTE, CA 92672-3838	95-6111998	501(C)(3)	214,115.	0.			GENERAL SUPPORT
B&GCS OF THE BLACK HILLS 297 WALNUT AVE HILL CITY, SD 57745-0677	46-0332124	501(C)(3)	213,233.	0.			GENERAL SUPPORT
B&GC OF DUNDEE TOWNSHIP 20 S GROVE ST, 201 CARPENTERSVILLE, IL 60110-2640	36-4184937	501(C)(3)	212,652.	0.			GENERAL SUPPORT
B&GC OF PATERSON AND PASSAIC, INC. 264 21ST AVE PATERSON, NJ 07501-3506	22-1726665	501(C)(3)	212,478.	0.			GENERAL SUPPORT
B&GC OF ROCKFORD 1040 N 2ND ST ROCKFORD, IL 61107-3066	36-2167840	501(C)(3)	212,145.	0.			GENERAL SUPPORT
B&GC OF CORPUS CHRISTI 3902 GREENWOOD DR CORPUS CHRISTI, TX 78416-1905	74-1294586	501(C)(3)	212,087.	0.			GENERAL SUPPORT
B&GC OF THE MISSOURI RIVER AREA 104 SHERIDAN AVE SE WAGNER, SD 57380-9518	46-0445099	501(C)(3)	211,831.	0.			GENERAL SUPPORT
B&GC OF ABERDEEN AREA 1121 1ST AVE SE ABERDEEN, SD 57401-4704	23-7062273	501(C)(3)	211,081.	0.			GENERAL SUPPORT

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B&GCS OF GORDON, MURRAY, AND WHITFIELD COUNTIES - 1013 UNDERWOOD ST - DALTON, GA 30721-3610	26-0725291	501(C)(3)	210,399.	0.			GENERAL SUPPORT
THE SALVATION ARMY B&GCS OF TEXAS 1221 RIVER BEND DR DALLAS, TX 75247-4911	75-0800678	501(C)(3)	210,229.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL GEORGIA 227 MARTIN LUTHER KING JR BLVD, STE MACON, GA 31201-3470	58-0621444	501(C)(3)	209,488.	0.			GENERAL SUPPORT
CLINTON COUNTY B&GC 110 W GREEN ST. FRANKFORT, IN 46041-1255	35-1172553	501(C)(3)	209,403.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL MISSISSIPPI 1450 W CAPITOL ST JACKSON, MS 39203-2121	64-0331635	501(C)(3)	206,879.	0.			GENERAL SUPPORT
B&GCS OF THE GULF COAST 201 HOLLY CIR GULFPORT, MS 39501-8624	64-0539145	501(C)(3)	206,394.	0.			GENERAL SUPPORT
B&GCS OF DEEP EAST TEXAS 941 TOWER ROAD NACOGDOCHES, TX 75961-4767	75-2254579	501(C)(3)	205,204.	0.			GENERAL SUPPORT
SOUTH QUEENS B&GC 11004 ATLANTIC AVE SOUTH RICHMOND HILL, NY 11419-1026	11-1966067	501(C)(3)	205,068.	0.			GENERAL SUPPORT
B&GCS OF BOSTON 200 HIGH ST BOSTON, MA 02110-3036	04-2103922	501(C)(3)	204,212.	0.			GENERAL SUPPORT

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B&GC OF THE LUMBEE TRIBE OF NORTH CAROLINA - 6984 NC HWY 711 - PEMBROKE, NC 28372-8689	84-1704531	501(C)(3)	203,974.	0.			GENERAL SUPPORT
B&GC OF THE HATCHIE RIVER REGION 412 ALSTON AVE, BUILDING C COVINGTON, TN 38019-2022	27-3459151	501(C)(3)	201,065.	0.			GENERAL SUPPORT
FOUNDATION FOR YOUTH OF BARTHOLOMEW COUNTY - 405 HOPE AVE - COLUMBUS, IN 47201-6435	35-0873340	501(C)(3)	200,826.	0.			GENERAL SUPPORT
B&GC OF SEQUOYAH COUNTY 208 S MAIN ST SALLISAW, OK 74955-5828	73-1128670	501(C)(3)	200,706.	0.			GENERAL SUPPORT
B&GC OF BANDERA COUNTY 715 MAPLE ST BANDERA, TX 78003-3155	74-2728659	501(C)(3)	200,386.	0.			GENERAL SUPPORT
B&GC OF ABILENE 4610 N 10TH ST ABILENE, TX 79603-4051	75-1001991	501(C)(3)	199,119.	0.			GENERAL SUPPORT
B&GC OF BAY MILLS 12099 W LAKESHORE DR BRIMLEY, MI 49715-9318	38-1970365	501(C)(3)	197,148.	0.			GENERAL SUPPORT
B&GC OF COLLIER COUNTY 7500 DAVIS BLVD NAPLES, FL 34104-5309	65-0279110	501(C)(3)	196,508.	0.			GENERAL SUPPORT
B&GCS OF KENTUCKIANA 3900 CRITTENDEN DR LOUISVILLE, KY 40209-1126	61-0568789	501(C)(3)	196,175.	0.			GENERAL SUPPORT

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B&GC OF HERNANDO COUNTY 5425 COMMERCIAL WAY SPRING HILL, FL 34606-1110	59-3550575	501(C)(3)	195,154.	0.			GENERAL SUPPORT
B&GCS OF COOKE COUNTY 315 N DENTON ST GAINESVILLE, TX 76240	75-2255185	501(C)(3)	194,992.	0.			GENERAL SUPPORT
B&GCS OF NORTHWEST GEORGIA 211 E MAIN ST SW ROME, GA 30161-4749	58-0632795	501(C)(3)	193,829.	0.			GENERAL SUPPORT
B&GCS OF SOUTH PUGET SOUND 3875 S 66TH ST TACOMA, WA 98402-3323	91-0759832	501(C)(3)	193,807.	0.			GENERAL SUPPORT
B&GC OF NORTH MISSISSIPPI 213 W MAIN ST, STE 240 TUPELO, MS 38804-3994	64-0880602	501(C)(3)	193,632.	0.			GENERAL SUPPORT
B&GCS OF THE MIDLANDS, INC. 2610 HAMILTON ST OMAHA, NE 68131-1640	47-0467350	501(C)(3)	191,886.	0.			GENERAL SUPPORT
B&GCS OF LAKELAND 1525 MARTIN L KING JR AVE LAKELAND, FL 33805-3627	59-0171815	501(C)(3)	191,735.	0.			GENERAL SUPPORT
B&GC OF NEW HAVEN 253 COLUMBUS AVE NEW HAVEN, CT 06519-2230	06-0646935	501(C)(3)	191,569.	0.			GENERAL SUPPORT
LUBBOCK B&GC 3221 59TH ST LUBBOCK, TX 79413-5515	75-1037228	501(C)(3)	190,416.	0.			GENERAL SUPPORT

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B&GCS OF BAY COUNTY 3404 W 19TH ST PANAMA CITY, FL 32405-1500	59-1114292	501(C)(3)	190,042.	0.			GENERAL SUPPORT
B&GC OF THE LAC COURTE OREILLES OJIBWE BAND - 8575 N TREPANIA RD - HAYWARD, WI 54843-2205	39-1832703	501(C)(3)	189,673.	0.			GENERAL SUPPORT
B&GC OF ALLENTOWN 720 N 6TH ST ALLENTOWN, PA 18102-1608	23-1352042	501(C)(3)	189,670.	0.			GENERAL SUPPORT
B&GC OF SOUTHEAST ALABAMA 195 MARTIN LUTHER KING JR AVE OZARK, AL 36360	58-2010059	501(C)(3)	189,387.	0.			GENERAL SUPPORT
COMMUNITY B&GC 901 NIXON ST WILMINGTON, NC 28401-2965	56-0636247	501(C)(3)	188,842.	0.			GENERAL SUPPORT
B&GC OF THE TAR RIVER REGION (NASH/EDGEcombe CO) - 301 S CHURCH ST, STE 290 - ROCKY MOUNT, NC 27804-5755	56-0934910	501(C)(3)	188,737.	0.			GENERAL SUPPORT
B&GCS OF ADA COUNTY 610 E 42ND ST GARDEN CITY, ID 83714-6388	82-0481687	501(C)(3)	187,649.	0.			GENERAL SUPPORT
B&GC OF THE OZARKS 1460 BEE CREEK RD BRANSON, MO 65616-9155	43-1664669	501(C)(3)	187,361.	0.			GENERAL SUPPORT
B&GC/CARING PEOPLE ALLIANCE 1628 JOHN F KENNEDY BLVD, STE 800, 8 PENN CENTER - PHILADELPHIA, PA 19103-21	23-1352104	501(C)(3)	186,271.	0.			GENERAL SUPPORT

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B&GC OF SAN MARCOS 1 POSITIVE PL SAN MARCOS, CA 92069-2875	95-3330218	501(C)(3)	185,810.	0.			GENERAL SUPPORT
B&GC OF INDIAN RIVER COUNTY 1729 17TH AVE VERO BEACH, FL 32960-3641	59-3623298	501(C)(3)	183,869.	0.			GENERAL SUPPORT
B&GC OF LANCASTER 116 S WATER ST LANCASTER, PA 17603-5319	23-1352044	501(C)(3)	183,554.	0.			GENERAL SUPPORT
B&GCS OF NORTH GEORGIA 101 FREEDOM WAY JASPER, GA 30143-4993	20-2957153	501(C)(3)	183,333.	0.			GENERAL SUPPORT
B&GCS OF THE PEE DEE AREA 310 W ROUGHFORK ST FLORENCE, SC 29506-6282	57-6026677	501(C)(3)	183,276.	0.			GENERAL SUPPORT
B&GCS OF COACHELLA VALLEY, INC. 42600 COOK ST, STE 120 PALM DESERT, CA 92211-5143	95-6122699	501(C)(3)	183,025.	0.			GENERAL SUPPORT
B&GCS OF MANATEE COUNTY 5236 30TH ST W, 2ND FLOOR BRADENTON, FL 34207	59-0675141	501(C)(3)	182,915.	0.			GENERAL SUPPORT
SANTA CLARITA VALLEY B&GC 24909 NEWHALL AVE NEWHALL, CA 91321-1033	95-2572622	501(C)(3)	179,055.	0.			GENERAL SUPPORT
B&GC OF SOUHEGAN VALLEY 56 MONT VERNON RD MILFORD, NH 03055-4116	02-0450773	501(C)(3)	176,853.	0.			GENERAL SUPPORT

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B&GC OF CENTRAL ARKANSAS 1400 W MARKHAM ST, SUITE 402 LITTLE ROCK, AR 72201-1840	20-8095568	501(C)(3)	176,278.	0.			GENERAL SUPPORT
B&GC OF THE OLYMPIC PENINSULA 400 W FIR ST SEQUIM, WA 98382-3326	91-1376766	501(C)(3)	176,228.	0.			GENERAL SUPPORT
B&GC OF EL DORADO COUNTY WESTERN SLOPE - 2840 MALLARD LN - PLACERVILLE, CA 95667	91-1774039	501(C)(3)	175,776.	0.			GENERAL SUPPORT
B&GCS OF LARIMER COUNTY 103 SMOKEY ST FORT COLLINS, CO 80525-3801	74-2425914	501(C)(3)	175,574.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF GENERATIONAL EMPOWERMENT - PO BOX 774 - OHKAY OWINGEH, NM 87566-0774	92-0412893	501(C)(3)	172,439.	0.			GENERAL SUPPORT
SA B&GC OF NORTH CAROLINA & S. CAROLINA - 501 ARCHDALE DR - CHARLOTTE, NC 28217-4216	58-0660607	501(C)(3)	172,292.	0.			GENERAL SUPPORT
B&GCS OF CLEVELAND (THE OCOEE REGION) - 385 3RD ST SW - CLEVELAND, TN 37311-5977	62-0729406	501(C)(3)	171,390.	0.			GENERAL SUPPORT
B&GCS OF WESTERN NEVADA 1870 RUSSELL WAY CARSON CITY, NV 89706-2785	88-0269139	501(C)(3)	170,738.	0.			GENERAL SUPPORT
B&GCS OF THE FOOTHILLS 600 S SHAMROCK AVE MONROVIA, CA 91016-3699	95-4453545	501(C)(3)	169,445.	0.			GENERAL SUPPORT

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B&GC OF MARTIN COUNTY 11500 SE LARES AVE HOBE SOUND, FL 33455-5240	65-0253002	501(C)(3)	167,636.	0.			GENERAL SUPPORT
B&GCS OF HARTFORD 170 SIGOURNEY ST HARTFORD, CT 06105-1908	06-6026005	501(C)(3)	166,977.	0.			GENERAL SUPPORT
B&GC OF BENTON COUNTY 2801 WALKER ST BENTONVILLE, AR 72712-4153	71-0713904	501(C)(3)	166,966.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF UNITED AMERICAN INDIAN INVOLVEMENT, INC. - 1453 W TEMPLE ST - LOS ANGELES, CA 90026-5648	95-2917933	501(C)(3)	164,750.	0.			GENERAL SUPPORT
B&GC OF HARLEM, INC. 521 W 145TH ST NEW YORK, NY 10031-5101	13-3102951	501(C)(3)	162,468.	0.			GENERAL SUPPORT
B&GCS OF SOUTHWEST WASHINGTON 1111 MAIN ST, 605 VANCOUVER, WA 98660-2990	91-1978646	501(C)(3)	161,997.	0.			GENERAL SUPPORT
B&GC OF BENTON HARBOR 600 NATE WELLS SENIOR DRIVE BENTON HARBOR, MI 49022-2932	38-3461586	501(C)(3)	161,452.	0.			GENERAL SUPPORT
B&GC OF DETROIT LAKES 150 RICHWOOD RD DETROIT LAKE, MN 56501-2100	41-0871442	501(C)(3)	161,344.	0.			GENERAL SUPPORT
B&GC OF NORTHEAST MISSISSIPPI 1500 N HARPER RD, SUITE 3B CORINTH, MS 38834-3700	64-0389412	501(C)(3)	161,261.	0.			GENERAL SUPPORT

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PUEBLO OF POJOAQUE BOYS & GIRLS CLUB - 101A LIGHTNING LOOP - SANTA FE, NM 87506-8713	85-0219423	501(C)(3)	161,218.	0.			GENERAL SUPPORT
B&GC OF WATERTOWN 1000 3RD AVE NE WATERTOWN, SD 57201-2812	46-0311845	501(C)(3)	160,951.	0.			GENERAL SUPPORT
B&GCS OF WEST ALABAMA 2201 ALBERTA PARKWAY TUSCALOOSA, AL 35404-3062	63-0452285	501(C)(3)	159,572.	0.			GENERAL SUPPORT
B&GCS OF BENTON AND FRANKLIN COUNTIES - 2110 W HENRY ST - PASCO, WA 99301-4503	91-1673327	501(C)(3)	159,555.	0.			GENERAL SUPPORT
B&GCS OF LA HABRA 1211 FAHRINGER WAY LA HABRA, CA 90631-3732	95-1922180	501(C)(3)	155,538.	0.			GENERAL SUPPORT
B&GCS OF THE COLORADO RIVER 2250 HIGHLAND RD BULLHEAD CITY, AZ 86442-5941	86-0573993	501(C)(3)	154,309.	0.			GENERAL SUPPORT
B&GCS OF SOUTHEAST VIRGINIA 1300 DIAMOND SPRINGS RD, STE 300 VIRGINIA BEACH, VA 23455-3645	54-0515764	501(C)(3)	153,699.	0.			GENERAL SUPPORT
B&GC OF SIERRA VISTA 1746 PASEO SAN LUIS SIERRA VISTA, AZ 85635-4610	86-0801728	501(C)(3)	152,024.	0.			GENERAL SUPPORT
B&GCS OF WEST-CENTRAL WISCONSIN 105 W. MILWAUKEE STREET TOMAH, WI 54660-1920	39-1962065	501(C)(3)	150,602.	0.			GENERAL SUPPORT

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B&GCS OF ALBUQUERQUE & RIO RANCHO 3333 TRUMAN ST NE ALBUQUERQUE, NM 87110-1853	85-0106943	501(C)(3)	149,523.	0.			GENERAL SUPPORT
B&GC OF OKLAHOMA COUNTY 3535 N WESTERN AVE OKLAHOMA CITY, OK 73118-5621	73-1472202	501(C)(3)	149,336.	0.			GENERAL SUPPORT
B&GC OF JACKSON 832 LEXINGTON AVE JACKSON, TN 38301-5041	62-0784907	501(C)(3)	149,201.	0.			GENERAL SUPPORT
B&GC OF LOWER BRULE 325 SITTING BULL STREET LOWER BRULE, SD 57548-0228	46-0463372	501(C)(3)	149,196.	0.			GENERAL SUPPORT
B&GC OF THE GRAND RIVER AREA 210 MAIN ST MC LAUGHLIN, SD 57642-0229	46-0376995	501(C)(3)	149,185.	0.			GENERAL SUPPORT
B&GC OF THE PRAIRIE BAND POTAWATOMI NATION - 15424 K RD - MAYETTA, KS 66509-9093	90-0036315	501(C)(3)	147,617.	0.			GENERAL SUPPORT
B&GCS OF CHATTANOOGA 1307 E MAIN ST CHATTANOOGA, TN 37404-4944	62-0557179	501(C)(3)	147,282.	0.			GENERAL SUPPORT
B&GC OF ALICE 793 SOUTH TEXAS BLVD ALICE, TX 78332	74-1463071	501(C)(3)	147,071.	0.			GENERAL SUPPORT
B&GC OF THE PIKES PEAK REGION 1307 AEROPLAZA DR COLORADO SPRINGS, CO 80916-2247	84-0416503	501(C)(3)	146,735.	0.			GENERAL SUPPORT

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B&GCS OF CENTRAL ILLINOIS 300 S 15TH ST SPRINGFIELD, IL 62703-1219	37-0752849	501(C)(3)	146,673.	0.			GENERAL SUPPORT
B&GC OF PALM SPRINGS 450 S SUNRISE WAY PALM SPRINGS, CA 92262-7641	95-1957907	501(C)(3)	146,269.	0.			GENERAL SUPPORT
B&GCS OF RUTHERFORD COUNTY 820 JONES BLVD MURFREESBORO, TN 37129-2382	62-1583332	501(C)(3)	145,718.	0.			GENERAL SUPPORT
B&GC OF EAST MISSISSIPPI, INC. 1717 45TH AVE MERIDIAN, MS 39307-5473	64-0728662	501(C)(3)	144,874.	0.			GENERAL SUPPORT
B&GC OF ST CHARLES COUNTY 1211 LINDENWOOD AVE SAINT CHARLES, MO 63301-0805	43-0714369	501(C)(3)	144,473.	0.			GENERAL SUPPORT
B&GC OF FREDERICK COUNTY 413 BURCK ST FREDERICK, MD 21701-6302	26-3424855	501(C)(3)	143,802.	0.			GENERAL SUPPORT
B&GCS OF SOUTH CENTRAL KANSAS 2400 N OPPORTUNITY DR WICHITA, KS 67219-5529	48-1071303	501(C)(3)	141,843.	0.			GENERAL SUPPORT
B&GC OF GREATER HOLLAND 435 VAN RAALTE AVE HOLLAND, MI 49423-3941	38-2756671	501(C)(3)	141,449.	0.			GENERAL SUPPORT
B&GCS OF NORTH CENTRAL LOUISIANA 300 MEMORIAL DR RUSTON, LA 71270-3954	72-1375839	501(C)(3)	140,898.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF TRACY 753 W LOWELL AVE TRACY, CA 95376-2935	68-0028682	501(C)(3)	140,420.	0.			GENERAL SUPPORT
B&GC OF LAKE COUNTY 1801 SHERIDAN RD, STE 202 NORTH CHICAGO, IL 60064-2237	36-4266009	501(C)(3)	140,333.	0.			GENERAL SUPPORT
B&GCS OF MONTEREY COUNTY 1332 LA SALLE AVE SEASIDE, CA 93955-3219	94-1702753	501(C)(3)	138,708.	0.			GENERAL SUPPORT
B&GC OF NEW ROCHELLE 79 7TH ST NEW ROCHELLE, NY 10801-4859	13-1943644	501(C)(3)	137,487.	0.			GENERAL SUPPORT
B&GC OF THE PENOBSCOT NATION 7 NORTHERN RD PRESQUE ISLE, ME 04769-2027	26-0250671	501(C)(3)	137,372.	0.			GENERAL SUPPORT
B&GC OF SOUTHEAST GEORGIA 3836 JOHNSTON ST BRUNSWICK, GA 31520-3450	58-0973039	501(C)(3)	137,285.	0.			GENERAL SUPPORT
B&GC OF LAKE TAHOE 1100 LYONS AVE SOUTH LAKE TAHOE, CA 96150-8252	68-0241891	501(C)(3)	136,424.	0.			GENERAL SUPPORT
SANTA FE B&GC 730 ALTO ST SANTA FE, NM 87501-2521	85-0102948	501(C)(3)	136,371.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL IOWA 1421 WALKER ST DES MOINES, IA 50316-3471	42-6075138	501(C)(3)	134,346.	0.			GENERAL SUPPORT

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CENTER FOR CHILDREN AND FAMILIES, INC.(BGC NORMAN) - 210 S COCKREL AVE - NORMAN, OK 73071-5610	73-0933253	501(C)(3)	134,342.	0.			GENERAL SUPPORT
B&GC OF THE SANDHILLS 160 MEMORIAL PARK CT SOUTHERN PINES, NC 28387-5924	91-1877405	501(C)(3)	133,689.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF MCALESTER PO BOX 1111 MCALESTER, OK 74502	73-0708243	501(C)(3)	133,593.	0.			GENERAL SUPPORT
B&GC OF FULLERTON 2200 E COMMONWEALTH AVE FULLERTON, CA 92831-4212	95-1855645	501(C)(3)	133,185.	0.			GENERAL SUPPORT
B&GC OF HUNTINGTON VALLEY 16582 BROOKHURST ST FOUNTAIN VALLEY, CA 92708-2353	95-6192466	501(C)(3)	132,739.	0.			GENERAL SUPPORT
B&GCS OF NORTHWEST TENNESSEE 1015 E COLLEGE ST, SUITE B UNION CITY, TN 38261-3603	52-2441482	501(C)(3)	132,425.	0.			GENERAL SUPPORT
TOWN OF WALLKILL BOYS & GIRLS CLUB PO BOX 14 CIRCLEVILLE, NY 10919-0014	13-3741014	501(C)(3)	131,675.	0.			GENERAL SUPPORT
B&GC OF WASHINGTON COUNTY, INC. 925 N SILVERBROOK DR WEST BEND, WI 53090-2487	39-1773689	501(C)(3)	131,521.	0.			GENERAL SUPPORT
SOUTHSIDE B&GC 701 BERKLEY AVENUE EXT NORFOLK, VA 23523-1509	54-0839152	501(C)(3)	131,116.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GCS OF CHARLOTTE COUNTY 21450 GIBRALTER DR, #10 PORT CHARLOTTE, FL 33952-5417	65-0725247	501(C)(3)	131,015.	0.			GENERAL SUPPORT
B&GCS OF THE MIDLANDS 500 GRACERN RD COLUMBIA, SC 29201-2100	57-0399808	501(C)(3)	130,835.	0.			GENERAL SUPPORT
STATELINE BOYS & GIRLS CLUBS 202 MAPLE AVE BELOIT, WI 53511-3555	39-0974673	501(C)(3)	128,776.	0.			GENERAL SUPPORT
BGC OF THE MINNEAPOLIS AMERICAN INDIAN CTR - 1530 E FRANKLIN AVE - MINNEAPOLIS, MN 55404-2136	41-0966005	501(C)(3)	128,581.	0.			GENERAL SUPPORT
GEORGE WERDEN BUCK B&GC 226 E CLINTON ST JOLIET, IL 60432-2855	36-2270044	501(C)(3)	128,430.	0.			GENERAL SUPPORT
B&GCS OF METRO RICHMOND 5511 STAPLES MILL RD, STE 301 RICHMOND, VA 23228-5445	54-0564901	501(C)(3)	128,408.	0.			GENERAL SUPPORT
B&GC OF BROOKINGS 1126 SOUTHLAND LN BROOKINGS, SD 57006-4146	73-1630215	501(C)(3)	128,153.	0.			GENERAL SUPPORT
B&GC OF LANSING 4315 PLEASANT GROVE RD LANSING, MI 48910-4257	38-1788281	501(C)(3)	127,450.	0.			GENERAL SUPPORT
B&GC OF EL DORADO 1201 N WEST AVE EL DORADO, AR 71730-3851	71-0264300	501(C)(3)	127,342.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GC OF THE WAUSAU AREA 1710 N 2ND ST WAUSAU, WI 54403-3493	39-1850386	501(C)(3)	127,224.	0.			GENERAL SUPPORT
B&GC OF STAMFORD 347 STILLWATER AVE STAMFORD, CT 06902-3622	06-0646911	501(C)(3)	125,653.	0.			GENERAL SUPPORT
B&GC OF WESTMINSTER 14400 CHESTNUT ST WESTMINSTER, CA 92683-5004	95-2919799	501(C)(3)	125,311.	0.			GENERAL SUPPORT
B&GC OF TOPEKA 550 SE 27TH ST TOPEKA, KS 66605-1106	48-0636732	501(C)(3)	125,048.	0.			GENERAL SUPPORT
B&GCS OF AMERICAN SAMOA 998381 TAFUNA AIRPORT ROAD PAGO PAGO, AS 96799	66-0759053	501(C)(3)	124,683.	0.			GENERAL SUPPORT
B&GC OF AHA MACAV 1603 PLANTATION RD MOHAVE VALLEY, AZ 86440	86-0951487	501(C)(3)	124,075.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF ZAPATA COUNTY PO BOX 2326 ZAPATA, TX 78076-6201	74-2647294	501(C)(3)	123,258.	0.			GENERAL SUPPORT
SARAH HEINZ HOUSE 1 HEINZ ST PITTSBURGH, PA 15212-5920	25-0965390	501(C)(3)	122,987.	0.			GENERAL SUPPORT
B&GC OF SOUTHWEST VIRGINIA 1714 9TH ST SE ROANOKE, VA 24018-0721	54-1867366	501(C)(3)	122,559.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GC OF THE HI-DESERT 56525 LITTLE LEAGUE DR YUCCA VALLEY, CA 92284-2793	95-3766860	501(C)(3)	122,135.	0.			GENERAL SUPPORT
B&GCS 701 N RALEIGH BLVD RALEIGH, NC 27610-1692	56-0863051	501(C)(3)	121,066.	0.			GENERAL SUPPORT
B&GCS OF PUERTO RICO #501 AVE. ROBERTO H. TODD SAN JUAN, PR 00907	66-0327584	501(C)(3)	120,987.	0.			GENERAL SUPPORT
B&GCS OF THE COASTAL EMPIRE, INC. 510 E CHARLTON ST SAVANNAH, GA 31401-4612	58-0622969	501(C)(3)	120,241.	0.			GENERAL SUPPORT
B&GCS OF WAYNE COUNTY 1401 ROYALL AVE GOLDSBORO, NC 27534-2369	56-0706013	501(C)(3)	120,073.	0.			GENERAL SUPPORT
B&GC OF SANTA CLARA VALLEY 1400 E HARVARD BLVD SANTA PAULA, CA 93060-2942	95-2497853	501(C)(3)	119,932.	0.			GENERAL SUPPORT
B&GCS OF GLOUCESTER COUNTY, INC. 123 E HIGH ST GLASSBORO, NJ 08028-2548	54-2075655	501(C)(3)	119,924.	0.			GENERAL SUPPORT
B&GC OF CHELSEA 119 ASH ST CHELSEA, OK 74016-1132	73-1533089	501(C)(3)	119,882.	0.			GENERAL SUPPORT
B&GC OF AUSTIN COUNTY, INC. 1815 S TESCH ST BELLVILLE, TX 77418-2877	76-0640686	501(C)(3)	119,406.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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BOYS & GIRLS CLUBS OF MISSISSIPPI BAND OF CHOCTAW INDIANS - PO BOX 6010 - CHOCTAW, MS 39350-6010	64-0345731	501(C)(3)	119,128.	0.			GENERAL SUPPORT
B&GC OF TRENTON/MERCER COUNTY 212 CENTRE ST TRENTON, NJ 08611-2217	21-0634556	501(C)(3)	118,867.	0.			GENERAL SUPPORT
B&GC OF LAGUNA BEACH 1085 LAGUNA CANYON RD LAGUNA BEACH, CA 92651-1836	95-1878822	501(C)(3)	118,146.	0.			GENERAL SUPPORT
B&GC OF BALDWIN AND JONES COUNTIES 1140 W CHARLTON ST MILLEDGEVILLE, GA 31059-0701	58-1671393	501(C)(3)	118,068.	0.			GENERAL SUPPORT
B&GC OF NORTH CENTRAL GEORGIA 1140 MONTICELLO RD, SUITE 2A MADISON, GA 30650-4684	27-1029072	501(C)(3)	117,914.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF THE GREATER SANTIAM - 305 S 5TH ST - LEBANON, OR 97355-2700	52-1043668	501(C)(3)	117,284.	0.			GENERAL SUPPORT
B&GCS OF HARLINGEN 1209 W WASHINGTON AVE HARLINGEN, TX 78550-5366	74-1546529	501(C)(3)	116,657.	0.			GENERAL SUPPORT
B&GC OF DARLINGTON 4408 N HIGHWAY 81 EL RENO, OK 73036-8916	73-1535032	501(C)(3)	116,245.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF CITRUS COUNTY - 2021 S SUNCOAST BLVD - HOMOSASSA, FL 34448-1852	59-3124840	501(C)(3)	116,189.	0.			GENERAL SUPPORT

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A.G. GASTON BOYS & GIRLS CLUB 4821 AVENUE W BIRMINGHAM, AL 35208	63-0514348	501(C)(3)	115,453.	0.			GENERAL SUPPORT
B&GC OF THE COYOTE VALLEY 7601 N STATE ST REDWOOD VALLEY, CA 95470-9492	94-2375697	501(C)(3)	115,269.	0.			GENERAL SUPPORT
ORANGEBURG AREA BOYS CLUB 1313 CANNON BRIDGE RD CORDOVA, SC 29115-5041	57-0834510	501(C)(3)	114,372.	0.			GENERAL SUPPORT
B&GC OF TRANSYLVANIA COUNTY 11 GALLIMORE RD BREVARD, NC 28712-9591	56-2142829	501(C)(3)	114,212.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF WOOSTER PO BOX 149 WOOSTER, OH 44691-0149	46-3469624	501(C)(3)	113,783.	0.			GENERAL SUPPORT
B&GC OF JEFFERSON COUNTY 2701 SHORT REEKER ST PINE BLUFF, AR 71601-2957	71-0264612	501(C)(3)	113,435.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL MINNESOTA 345 30TH AVE N SAINT CLOUD, MN 56303-3755	41-1245177	501(C)(3)	112,547.	0.			GENERAL SUPPORT
WAKEMAN MEMORIAL ASSOCIATION 385 CENTER ST SOUTHPORT, CT 06890-1431	06-0662198	501(C)(3)	112,236.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF PLEASANTS COUNTY - 605 CHERRY ST - SAINT MARYS, WV 26170-1161	55-0761328	501(C)(3)	112,224.	0.			GENERAL SUPPORT

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B&GCS OF ST. HELENA AND CALISTOGA, INC. - 1420 TAINTER ST - SAINT HELENA, CA 94574-1949	68-0226714	501(C)(3)	112,181.	0.			GENERAL SUPPORT
PATUXENT RIVER MD NAVY YOUTH PROGRAMS - 46983 HINKLE CIR, BLDG 1597 - PATUXENT RIVER, MD 20670-1126	53-0228403	501(C)(3)	111,868.	0.			GENERAL SUPPORT
UNITED B&GCS OF SANTA BARBARA COUNTY - 1528 CHAPALA ST, 309 - SANTA BARBARA, CA 93101-8819	23-7087814	501(C)(3)	111,810.	0.			GENERAL SUPPORT
CHEROKEE YOUTH CENTER 1570 ACQUONI RD CHEROKEE, NC 28719	56-2053463	501(C)(3)	111,434.	0.			GENERAL SUPPORT
B&GC OF MALIBU 30215 MORNING VIEW DR MALIBU, CA 90265-3616	95-4774844	501(C)(3)	111,354.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF CHAFFEE COUNTY - PO BOX 1430 - SALIDA, CO 81201	55-0907901	501(C)(3)	111,262.	0.			GENERAL SUPPORT
B&GC OF MOORPARK 4263 TIERRA REJADA RD MOORPARK, CA 93021-3772	77-0112701	501(C)(3)	111,107.	0.			GENERAL SUPPORT
B&GC OF JACKSON COUNTY, INC. 412 GORDON ST JEFFERSON, GA 30549-6810	26-1889825	501(C)(3)	110,526.	0.			GENERAL SUPPORT
B&GCS OF CRITTENDEN COUNTY 990 N MISSOURI WEST MEMPHIS, AR 72301-2611	71-0352307	501(C)(3)	110,501.	0.			GENERAL SUPPORT

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B&GCS OF DUMPLIN VALLEY 218 N HIGHWAY 92 JEFFERSON CITY, TN 37760-3443	26-1475216	501(C)(3)	109,603.	0.			GENERAL SUPPORT
B&GCS OF EAST CENTRAL ALABAMA 920 NOBLE ST ANNISTON, AL 36201-5628	63-0516163	501(C)(3)	109,288.	0.			GENERAL SUPPORT
BLACK CANYON BOYS & GIRLS CLUB PO BOX 1907 MONTROSE, CO 81402-1907	84-1508048	501(C)(3)	109,151.	0.			GENERAL SUPPORT
B&GCS OF THE SAN GORGONIO PASS 240 W RAMSEY ST BANNING, CA 92220-4821	20-3812932	501(C)(3)	109,130.	0.			GENERAL SUPPORT
B&GC OF HOLLYWOOD 850 N CAHUENGA BLVD LOS ANGELES, CA 90038-3704	95-1775142	501(C)(3)	108,933.	0.			GENERAL SUPPORT
B&GCS OF SOUTHERN MAINE 277 CUMBERLAND AVE PORTLAND, ME 04101-4919	01-0211543	501(C)(3)	108,665.	0.			GENERAL SUPPORT
B&GC OF GADSDEN/ETOWAH COUNTY 2000 W MEIGHAN BLVD GADSDEN, AL 35904-1702	46-3889209	501(C)(3)	108,616.	0.			GENERAL SUPPORT
B&GC OF EDENTON / CHOWAN COUNTY, INC. - 131 MORRISTOWN RD - EDENTON, NC 27932-1423	61-1546080	501(C)(3)	108,293.	0.			GENERAL SUPPORT
B&GC OF STONEHAM, INC. 15 DALE CT STONEHAM, MA 02180-1813	23-7025777	501(C)(3)	107,933.	0.			GENERAL SUPPORT

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BOYS & GIRLS CLUB OF PEKIN 1101 VEERMAN ST PEKIN, IL 61554	37-0800532	501(C)(3)	107,115.	0.			GENERAL SUPPORT
CANNON AFB YOUTH PROGRAM 27 SVS/SVYY CANNON AFB, NM 88101	53-0228403	501(C)(3)	106,818.	0.			GENERAL SUPPORT
B&GC OF LA PLATA COUNTY, INC. 2750 MAIN AVE DURANGO, CO 81301-5940	20-5112759	501(C)(3)	106,623.	0.			GENERAL SUPPORT
B&GCS OF CEDAR RAPIDS 420 6TH ST SE, SUITE 240 CEDAR RAPIDS, IA 52401-1903	42-1434056	501(C)(3)	106,260.	0.			GENERAL SUPPORT
B&GC OF CYPRESS 1260 NORTH RIVERIA STREET ANAHEIM, CA 92801	95-2920990	501(C)(3)	106,013.	0.			GENERAL SUPPORT
B&GC OF WASHINGTON COUNTY 805 PENNSYLVANIA AVE HAGERSTOWN, MD 21742-3103	23-7252343	501(C)(3)	105,902.	0.			GENERAL SUPPORT
B&GC OF YOUNGSTOWN 2105 OAK HILL AVE YOUNGSTOWN, OH 44507-1300	34-1039928	501(C)(3)	105,575.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF SHEBOYGAN COUNTY - 2500 KOHLER MEMORIAL DRIVE, SUITE A - SHEBOYGAN, WI 53081	39-1246782	501(C)(3)	105,346.	0.			GENERAL SUPPORT
B&GCS OF SOUTHERN RENSSELAER COUNTY - 544 BROADWAY - RENSSELAER, NY 12144-2607	14-1471475	501(C)(3)	104,807.	0.			GENERAL SUPPORT

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B&GC OF YELLOWSTONE COUNTY 505 ORCHARD LN BILLINGS, MT 59101-5027	81-0308003	501(C)(3)	104,443.	0.			GENERAL SUPPORT
B&GC OF LIVINGSTON COUNTY 1303 E INDIANA AVE PONTIAC, IL 61764-1207	37-0975574	501(C)(3)	104,174.	0.			GENERAL SUPPORT
B&GC OF TRINITY 100 W. SAN JACINTO TRINITY, TX 75862-0665	75-2913351	501(C)(3)	104,083.	0.			GENERAL SUPPORT
B&GC OF SOUTHWEST COUNTY 25090 JEFFERSON AVE, SUITE A MURRIETA, CA 92562-1703	33-0475756	501(C)(3)	104,067.	0.			GENERAL SUPPORT
WELLS COMMUNITY B&GC 1410 S WAYNE ST BLUFFTON, IN 46714-9409	31-1253620	501(C)(3)	103,361.	0.			GENERAL SUPPORT
B&GCS OF GREEN COUNTRY 1111 SE 9TH ST PRYOR, OK 74361-7214	73-1527045	501(C)(3)	102,970.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF ALTON PO BOX 532 ALTON, IL 62002-0532	36-4142577	501(C)(3)	102,874.	0.			GENERAL SUPPORT
SUANNE BIG CROW BOYS & GIRLS CLUBS PO BOX 5079 PINE RIDGE, SD 57770	46-0423326	501(C)(3)	102,500.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF FREEPORT & STEPHENSON COUNTY - 511 S LIBERTY AVE - FREEPORT, IL 61032-5600	35-2313105	501(C)(3)	102,335.	0.			GENERAL SUPPORT

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B&GC OF LAS CRUCES 330 W LAS CRUCES AVE LAS CRUCES, NM 88005-2516	85-0167102	501(C)(3)	102,329.	0.			GENERAL SUPPORT
SPRINGFIELD B&GC 481 CAREW ST SPRINGFIELD, MA 01104-2362	04-1858620	501(C)(3)	101,771.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF WEBSTER-DUDLEY - 55 OXFORD AVE - DUDLEY, MA 01571-3201	04-2238069	501(C)(3)	101,541.	0.			GENERAL SUPPORT
B&GC OF BROCKTON 19 COURT ST TAUNTON, MA 02780-3248	22-2963214	501(C)(3)	101,538.	0.			GENERAL SUPPORT
B&GC OF CABARRUS COUNTY, INC. 247 SPRING ST NW CONCORD, NC 28025-4724	56-0577630	501(C)(3)	101,519.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE GILA VALLEY - 805 S 7TH AVE - SAFFORD, AZ 85546	36-4708413	501(C)(3)	101,007.	0.			GENERAL SUPPORT
B&GCS OF CAPISTRANO VALLEY 1 VIA POSITIVA SAN JUAN CAPISTRANO, CA 92675-4316	33-0529575	501(C)(3)	100,294.	0.			GENERAL SUPPORT
B&GC OF SOUTHWEST MISSISSIPPI 1025 POSITIVE PL MCCOMB, MS 39648-7304	64-0806571	501(C)(3)	99,972.	0.			GENERAL SUPPORT
B&GC OF THE GOLDEN TRIANGLE 911 LYNN LN STARKVILLE, MS 39759-4408	26-2695696	501(C)(3)	99,441.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF THE NORTHLAND 102 S 29TH AVE W, STE 200 DULUTH, MN 55806-1852	41-0969947	501(C)(3)	98,995.	0.			GENERAL SUPPORT
B&GC OF ERIE 1515 E LAKE RD ERIE, PA 16511-1031	25-1265501	501(C)(3)	98,979.	0.			GENERAL SUPPORT
B&GC OF EASTON 210 JONES HOUSTON WAY EASTON, PA 18042-8783	23-1941228	501(C)(3)	98,671.	0.			GENERAL SUPPORT
B&GCS OF SOUTH ALABAMA 1102 GOVERNMENT ST MOBILE, AL 36604-2406	63-0414826	501(C)(3)	97,261.	0.			GENERAL SUPPORT
B&GC OF FONTANA 7723 ALMERIA ST FONTANA, CA 92336-8702	33-0443344	501(C)(3)	97,045.	0.			GENERAL SUPPORT
B&GC OF GREATER HAVERHILL, INC. 55 EMERSON ST HAVERHILL, MA 01830-6103	04-2111215	501(C)(3)	96,898.	0.			GENERAL SUPPORT
B&GC OF PORTAGE COUNTY 941 MICHIGAN AVE STEVENS POINT, WI 54481-2935	73-1630506	501(C)(3)	96,833.	0.			GENERAL SUPPORT
B&GCS OF NORTH COUNTY 445 E IVY ST FALLBROOK, CA 92028-2122	95-2241614	501(C)(3)	96,421.	0.			GENERAL SUPPORT
B&GCS OF CASCADE COUNTY 600 1ST AVE SW GREAT FALLS, MT 59404-2808	81-0475269	501(C)(3)	95,632.	0.			GENERAL SUPPORT

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B&GC OF SANTA MARIA VALLEY 901 N RAILROAD AVE SANTA MARIA, CA 93458-3072	95-2468116	501(C)(3)	95,129.	0.			GENERAL SUPPORT
B&GC OF BLOOMINGTON-NORMAL 1615 W. ILLINOIS ST BLOOMINGTON, IL 61701-4727	37-1308723	501(C)(3)	94,851.	0.			GENERAL SUPPORT
B&GC OF WHITE MOUNTAIN APACHE 50 W CHINATOWN ST WHITERIVER, AZ 85941	86-0194403	501(C)(3)	94,691.	0.			GENERAL SUPPORT
B&GCS OF MITCHELL COUNTY 120 S HARNEY ST CAMILLA, GA 31730-2065	58-1976071	501(C)(3)	93,205.	0.			GENERAL SUPPORT
THE EDUCATIONAL ALLIANCE B&GC 197 E BROADWAY NEW YORK, NY 10002-5507	13-5562210	501(C)(3)	92,119.	0.			GENERAL SUPPORT
B&GCS OF NORTHEASTERN PENNSYLVANIA 609 ASH ST SCRANTON, PA 18510-1047	24-0796420	501(C)(3)	90,196.	0.			GENERAL SUPPORT
B&GC OF MAURY COUNTY 210 W 8TH ST COLUMBIA, TN 38401-3230	62-1611131	501(C)(3)	90,055.	0.			GENERAL SUPPORT
B&GC OF EAST PROVIDENCE 115 WILLIAMS AVE EAST PROVIDENCE, RI 02914-3510	05-0278988	501(C)(3)	89,819.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE SEMINOLE NATION OF OKALHO - 120 W. 4TH ST - SEMINOLE, OK 74884	73-0793515	501(C)(3)	88,652.	0.			GENERAL SUPPORT

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B&GC OF SHINNECOCK NATION 100 CHURCH STREET SOUTHAMPTON, NY 11968	35-2177466	501(C)(3)	88,183.	0.			GENERAL SUPPORT
B&GC OF THE LOWER NAUGATUCK VALLEY 1 POSITIVE PL SHELTON, CT 06484-2332	06-0653185	501(C)(3)	88,019.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL OREGON 500 NW WALL ST BEND, OR 97703-2608	93-1127536	501(C)(3)	87,196.	0.			GENERAL SUPPORT
B&GC OF SPRINGFIELD 1410 N FREMONT AVE SPRINGFIELD, MO 65802-2007	44-0513659	501(C)(3)	87,169.	0.			GENERAL SUPPORT
B&GC OF LODI 50 BROOKSIDE AVE LODI, NJ 07644-3214	22-1632037	501(C)(3)	86,476.	0.			GENERAL SUPPORT
B&GCS OF THE GREAT LAKES BAY REGION - 300 LAFAYETTE AVE - BAY CITY, MI 48706-4093	38-1648580	501(C)(3)	85,923.	0.			GENERAL SUPPORT
B&GC OF ENNIS 1701 S HALL ST ENNIS, TX 75119-6337	75-2746070	501(C)(3)	85,688.	0.			GENERAL SUPPORT
B&GC OF CORVALLIS 1112 NW CIRCLE BLVD CORVALLIS, OR 97330-1462	23-7153987	501(C)(3)	85,125.	0.			GENERAL SUPPORT
B&GC OF FLAGSTAFF 301 S PASEO DEL FLAG FLAGSTAFF, AZ 86001-6709	45-3083785	501(C)(3)	85,111.	0.			GENERAL SUPPORT

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LAWRENCE B&GC 136 WATER ST LAWRENCE, MA 01841-4722	04-2104377	501(C)(3)	83,771.	0.			GENERAL SUPPORT
B&GCS OF EAST COUNTY 8820 TAMBERLY WAY SANTEE, CA 92071-4258	95-2088013	501(C)(3)	83,593.	0.			GENERAL SUPPORT
B&GC OF EL SOBRANTE 1301 ALHAMBRA AVE MARTINEZ, CA 94553-2301	94-1525614	501(C)(3)	82,780.	0.			GENERAL SUPPORT
B&GC OF NAMPA 316 STAMPEDE DR NAMPA, ID 83687-6880	82-0504332	501(C)(3)	82,025.	0.			GENERAL SUPPORT
B&GC OF MISSOULA COUNTY 1515 FAIRVIEW AVE, SUITE 243 MISSOULA, MT 59801-7817	84-1414110	501(C)(3)	81,531.	0.			GENERAL SUPPORT
B&GCS OF HUDSON COUNTY 225 MORRIS BLVD JERSEY CITY, NJ 07302-7398	22-1918943	501(C)(3)	81,098.	0.			GENERAL SUPPORT
B&GC OF OCEANSIDE 401 COUNTRY CLUB LN OCEANSIDE, CA 92054-3439	95-1744805	501(C)(3)	80,874.	0.			GENERAL SUPPORT
B&GCS OF CHAMPION VALLEY 101 W JACKSON ST WEIMAR, TX 78962-2000	06-1674854	501(C)(3)	80,600.	0.			GENERAL SUPPORT
B&GC OF GREATER KINGSPORT 1 POSITIVE PLACE KINGSPORT, TN 37660	62-0481370	501(C)(3)	80,460.	0.			GENERAL SUPPORT

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HARLAN COUNTY B&GC, INC. 1 POSITIVE PL HARLAN, KY 40831-1675	31-1793599	501(C)(3)	80,077.	0.			GENERAL SUPPORT
B&GC OF THE EASTERN PANHANDLE 105 W JOHN ST MARTINSBURG, WV 25401-3219	20-2257657	501(C)(3)	79,410.	0.			GENERAL SUPPORT
B&GC OF ROCHESTER 500 GENESEE ST ROCHESTER, NY 14611-3696	16-1001619	501(C)(3)	78,804.	0.			GENERAL SUPPORT
B&GC OF THE SMOKY MOUNTAINS 311 BLUE PEACOCK WAY SEYMOUR, TN 37865-3926	62-1507789	501(C)(3)	78,542.	0.			GENERAL SUPPORT
B&GCS OF DORCHESTER, INC. 1135 DORCHESTER AVE DORCHESTER, MA 02125-1537	23-7076465	501(C)(3)	78,080.	0.			GENERAL SUPPORT
B&GCS OF THE BLUE RIDGE 311 E CHURCH ST, SUITE B MARTINSVILLE, VA 24112-2927	26-3166453	501(C)(3)	77,674.	0.			GENERAL SUPPORT
B&GC OF THE POARCH BAND OF CREEK INDIANS - 517 MARTIN RD. - ATMORE, AL 36426	63-0705119	501(C)(3)	77,498.	0.			GENERAL SUPPORT
B&GC OF COVINGTON COUNTY 300 MAIN ST COLLINS, MS 39428-2559	72-1376423	501(C)(3)	77,279.	0.			GENERAL SUPPORT
B&GC OF SANTA ANA 17701 COWAN, SUITE 110 IRVINE, CA 92614-6057	95-1893417	501(C)(3)	77,238.	0.			GENERAL SUPPORT

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B&GC OF MAGIC VALLEY 999 FRONTIER RD TWIN FALLS, ID 83301-2305	94-3176622	501(C)(3)	76,534.	0.			GENERAL SUPPORT
B&GCS OF MONTGOMERY 412 N HULL ST MONTGOMERY, AL 36104-2635	63-0302108	501(C)(3)	76,161.	0.			GENERAL SUPPORT
BRISTOL B&GC ASSOCIATION 255 WEST ST BRISTOL, CT 06010-5735	06-0646556	501(C)(3)	76,038.	0.			GENERAL SUPPORT
DON MOYER B&GC 201 E PARK ST CHAMPAIGN, IL 61820-3722	37-0906638	501(C)(3)	75,244.	0.			GENERAL SUPPORT
FLORIDA ALLIANCE OF B&GC 4384 NICOKE CIRCLE TEQUESTA, FL 33469	65-0839955	501(C)(3)	75,000.	0.			GENERAL SUPPORT
B&GC OF PARKERSBURG 1200 MARY ST PARKERSBURG, WV 26101-4933	55-0476226	501(C)(3)	74,378.	0.			GENERAL SUPPORT
B&GCS OF THE BIG BEND 723 W ORANGE AVE TALLAHASSEE, FL 32310-6834	59-3076558	501(C)(3)	74,231.	0.			GENERAL SUPPORT
B&GCS OF GARDEN GROVE 10540 CHAPMAN AVE GARDEN GROVE, CA 92840-3101	95-6112702	501(C)(3)	73,973.	0.			GENERAL SUPPORT
B&GC OF BRAZORIA COUNTY 4005 TECHNOLOGY RD, SUITE 2130 ANGLETON, TX 77515-2556	74-1688545	501(C)(3)	73,668.	0.			GENERAL SUPPORT

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B&GC OF SALINE COUNTY 1810 CITIZENS DRIVE BENTON, AR 72015-4068	23-0411510	501(C)(3)	73,467.	0.			GENERAL SUPPORT
OLIVET B&GC OF READING & BERKS COUNTY - 1161 PERSHING BLVD - READING, PA 19611-1701	23-1365380	501(C)(3)	72,462.	0.			GENERAL SUPPORT
B&GC OF SANFORD/LEE COUNTY 1013 CARTHAGE ST SANFORD, NC 27330-4114	56-1923703	501(C)(3)	72,374.	0.			GENERAL SUPPORT
TROY B&GC 21 DELAWARE ST ALBANY, NY 12202-3411	14-1338574	501(C)(3)	72,358.	0.			GENERAL SUPPORT
B&GC OF SHERMAN 1500 N LUCKETT ST SHERMAN, TX 75090-3949	75-1253018	501(C)(3)	72,098.	0.			GENERAL SUPPORT
B&GC OF RUTLAND COUNTY 75 MERCHANTS ROW RUTLAND, VT 05701-5904	31-1653365	501(C)(3)	71,879.	0.			GENERAL SUPPORT
B&GC OF SALEM, MARION & POLK COUNTIES - 1395 SUMMER ST NE - SALEM, OR 97301-7137	93-0581470	501(C)(3)	70,526.	0.			GENERAL SUPPORT
B&GCS OF THE MISSISSIPPI VALLEY 338 6TH ST MOLINE, IL 61265-1160	36-3838421	501(C)(3)	70,151.	0.			GENERAL SUPPORT
B&GC OF THE KENAI PENINSULA 705 FRONTAGE RD, STE B KENAI, AK 99611-7740	94-3067142	501(C)(3)	70,149.	0.			GENERAL SUPPORT

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B&GC OF KENOSHA 1330 52ND ST KENOSHA, WI 53140-3236	39-1732935	501(C)(3)	69,195.	0.			GENERAL SUPPORT
B&GC OF MARION COUNTY 800 SW 12TH AVE OCALA, FL 34471-0311	59-1172127	501(C)(3)	69,148.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF BANGOR 161 DAVIS RD BANGOR, ME 04401-2310	47-3408508	501(C)(3)	67,977.	0.			GENERAL SUPPORT
GLENN E. HINES MEMORIAL B&GC OF NEWBURGH - 285 LIBERTY ST - NEWBURGH, NY 12550-4624	14-1506144	501(C)(3)	67,893.	0.			GENERAL SUPPORT
B&GCS OF THE ROGUE VALLEY 203 SE 9TH ST GRANTS PASS, OR 97526-3022	93-0588108	501(C)(3)	67,464.	0.			GENERAL SUPPORT
THE B&GC OF WESLACO, INC 300 N AIRPORT DR, SUITE B WESLACO, TX 78596	90-0961342	501(C)(3)	67,430.	0.			GENERAL SUPPORT
SAN LEANDRO B&GC 2777 ALVARADO ST SAN LEANDRO, CA 94577-5701	94-6003779	501(C)(3)	67,217.	0.			GENERAL SUPPORT
B&GC OF RUSK COUNTY 710 ROBERTSON BLVD HENDERSON, TX 75652-6154	75-2730664	501(C)(3)	67,054.	0.			GENERAL SUPPORT
B&GC OF SPOKANE COUNTY 544 E PROVIDENCE AVE SPOKANE, WA 99207-1874	91-1983357	501(C)(3)	66,653.	0.			GENERAL SUPPORT

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USAG BAUMHOLDER CYS SERVICES UNIT 23746 B O X 7948 APO, AA 09034	75-1744396	501(C)(3)	66,000.	0.			GENERAL SUPPORT
B&GCS OF GRAND RAPIDS YOUTH COMMONWEALTH - 235 STRAIGHT AVE NW - GRAND RAPIDS, MI 49504-5633	38-0593958	501(C)(3)	65,865.	0.			GENERAL SUPPORT
B&GC OF JANESVILLE 200 W COURT ST JANESVILLE, WI 53548-3886	39-1645796	501(C)(3)	65,589.	0.			GENERAL SUPPORT
B&GC OF EL CAMPO, TEXAS 713 FAHRENTHOLD ST EL CAMPO, TX 77437	76-0364956	501(C)(3)	65,514.	0.			GENERAL SUPPORT
B&GCS OF WEST CENTRAL MISSOURI 3100 AARON AVENUE SEDALIA, MO 65301-4550	43-6051103	501(C)(3)	64,994.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF BISBEE PO BOX 5205 BISBEE, AZ 85603-5205	86-0986317	501(C)(3)	64,931.	0.			GENERAL SUPPORT
NIAGARA FALLS B&GC 725 17TH ST NIAGARA FALLS, NY 14301-2205	16-0743093	501(C)(3)	64,873.	0.			GENERAL SUPPORT
B&GCS OF THE SIOUX EMPIRE 824 E 14TH ST SIOUX FALLS, SD 57104-5221	14-0399482	501(C)(3)	64,773.	0.			GENERAL SUPPORT
B&GC OF THE PENINSULA 401 PIERCE RD MENLO PARK, CA 94025-1240	94-1552134	501(C)(3)	64,595.	0.			GENERAL SUPPORT

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B&GC OF MANCHESTER 555 UNION ST MANCHESTER, NH 03104-4840	02-0226033	501(C)(3)	64,317.	0.			GENERAL SUPPORT
B&GC OF THE HIGHLAND LAKES, INC. 1701 BROADWAY ST MARBLE FALLS, TX 78654-4965	74-2907284	501(C)(3)	63,278.	0.			GENERAL SUPPORT
B&GC OF WALKER COUNTY 119 FM 980 RD HUNTSVILLE, TX 77320	03-0476151	501(C)(3)	62,333.	0.			GENERAL SUPPORT
GRENVILLE BAKER B&GC 135 FOREST AVE LOCUST VALLEY, NY 11560-2123	11-1660855	501(C)(3)	62,320.	0.			GENERAL SUPPORT
ALAMEDA B&GC 1900 3RD ST, REAR BLDG ALAMEDA, CA 94501-1851	94-1312299	501(C)(3)	61,480.	0.			GENERAL SUPPORT
LAC VIEUX DESERT BAND OF LAKE SUPERIOR CHIPPEWA - E23968 POW WOW TRL - WATERSMEET, MI 49969	38-2629283	501(C)(3)	61,239.	0.			GENERAL SUPPORT
B&GC OF MASON VALLEY 124 N MAIN ST YERINGTON, NV 89447-2233	88-0407331	501(C)(3)	61,090.	0.			GENERAL SUPPORT
B&GCS OF EMERALD VALLEY 1545 W 22ND AVE EUGENE, OR 97405-1882	93-1264722	501(C)(3)	60,683.	0.			GENERAL SUPPORT
B&GCS OF HUTCHINSON 111 N WALNUT ST, SUITE A HUTCHINSON, KS 67501-7239	48-1088026	501(C)(3)	60,323.	0.			GENERAL SUPPORT

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B&GCS OF BROWN COUNTY 1701 AVENUE L BROWNWOOD, TX 76801-4836	74-2721815	501(C)(3)	59,941.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE SANTEE SIOUX NATION - 110 S VISITING EAGLE ST - NIOBRARA, NE 68760-7201	47-0533471	501(C)(3)	59,500.	0.			GENERAL SUPPORT
B&GC OF LAREDO 500 MOCTEZUMA ST LAREDO, TX 78040-7517	74-1152598	501(C)(3)	58,550.	0.			GENERAL SUPPORT
B&GC OF HENDERSON COUNTY/HENDERSONVILLE - 1304 ASHE ST - HENDERSONVILLE, NC 28792-2623	56-1803125	501(C)(3)	58,487.	0.			GENERAL SUPPORT
B&GC OF RUIDOSO 134 REESE DR RUIDOSO, NM 88345-6016	27-0586442	501(C)(3)	58,166.	0.			GENERAL SUPPORT
B&GC OF STANISLAUS COUNTY, INC 819 17TH ST, SUITE 300 MODESTO, CA 95354-1250	45-5034180	501(C)(3)	57,945.	0.			GENERAL SUPPORT
B&GC OF CHEYENNE WYOMING 515 WEST JEFFERSON ROAD CHEYENNE, WY 82007	83-0306118	501(C)(3)	56,587.	0.			GENERAL SUPPORT
B&GC OF MUSKEGON LAKESHORE 900 3RD ST, STE 200 MUSKEGON, MI 49440-1135	61-1736056	501(C)(3)	56,413.	0.			GENERAL SUPPORT
B&GC OF NAPA VALLEY 1515 PUEBLO AVE NAPA, CA 94558-4837	94-6033413	501(C)(3)	56,203.	0.			GENERAL SUPPORT

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B&GC OF CAMARILLO 1500 TEMPLE AVE CAMARILLO, CA 93010-3602	95-6194547	501(C)(3)	55,022.	0.			GENERAL SUPPORT
B&GC OF VENTURA 1280 S VICTORIA AVE, SUITE 240 VENTURA, CA 93003-6555	95-2248919	501(C)(3)	55,021.	0.			GENERAL SUPPORT
B&GC OF ALPENA 601 RIVER STREET ALPENA, MI 49707-2438	38-1405280	501(C)(3)	54,174.	0.			GENERAL SUPPORT
B&GC OF STANTON 11050 CEDAR ST STANTON, CA 90680-3103	95-2913402	501(C)(3)	53,954.	0.			GENERAL SUPPORT
FORT SMITH B&GC 4905 N O ST FORT SMITH, AR 72904-6617	71-0270690	501(C)(3)	53,919.	0.			GENERAL SUPPORT
DONALD W. REYNOLDS B&GC 560 N RUPPLE RD FAYETTEVILLE, AR 72704-6016	71-0254287	501(C)(3)	53,917.	0.			GENERAL SUPPORT
USAG FORT BLISS CYS SERVICES 5037 SHERATON FORT BLISS, TX 79916	90-0823515	501(C)(3)	53,866.	0.			GENERAL SUPPORT
B&GC OF LENAWEE 340 E CHURCH ST, SUITE A ADRIAN, MI 49221-2904	38-3558470	501(C)(3)	53,685.	0.			GENERAL SUPPORT
KINGS BAY YOUTH CENTER / B&GC 650 WAHOO AVENUE, BLDG 0166 KINGS BAY, GA 31547	84-2900114	501(C)(3)	52,627.	0.			GENERAL SUPPORT

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B&GC OF THE RED RIVER VALLEY 1530 1ST ST NE PARIS, TX 75460-2610	75-0800621	501(C)(3)	52,397.	0.			GENERAL SUPPORT
B&GC OF THE BEMIDJI AREA 1600 MINNESOTA AVE NW BEMIDJI, MN 56601-0191	81-0599601	501(C)(3)	51,825.	0.			GENERAL SUPPORT
AKWESASNE B&GC, SAINT REGIS MOHAWK TRIBE - 37 ROOSEVELTOWN RD - HOGANSBURG, NY 13655	16-1607731	501(C)(3)	51,591.	0.			GENERAL SUPPORT
B&GCS OF ALBANY 711 N MONROE ST ALBANY, GA 31701-2268	58-6046393	501(C)(3)	51,255.	0.			GENERAL SUPPORT
THE B&GC OF WASHINGTON COUNTY 307 LANCASTER ST, SUITE 1 MARIETTA, OH 45750-2781	45-3445754	501(C)(3)	51,190.	0.			GENERAL SUPPORT
NORTH PENN VALLEY B&GC 16 SUSQUEHANNA AVE LANSDALE, PA 19446-3606	23-7164617	501(C)(3)	50,996.	0.			GENERAL SUPPORT
B&GCS OF MOULTRIE-COLQUITT COUNTY 420 W CENTRAL AVE MOULTRIE, GA 31768-3660	26-3586811	501(C)(3)	50,706.	0.			GENERAL SUPPORT
B&GC OF THE PIEDMONT 1001 COCHRAN ST STATESVILLE, NC 28677-5671	20-3237215	501(C)(3)	50,667.	0.			GENERAL SUPPORT
TEXAS ALLIANCE 166 HARGRAVES DR, STE C-400-248 AUSTIN, TX 78737	75-2939705	501(C)(3)	50,000.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF THE GREATER CHIPPEWA VALLEY - 1005 OXFORD AVE - EAU CLAIRE, WI 54703-5347	39-2032491	501(C)(3)	49,826.	0.			GENERAL SUPPORT
VARIETY B&GC OF QUEENS 2112 30TH RD LONG ISLAND CITY, NY 11102-3331	11-6014770	501(C)(3)	49,650.	0.			GENERAL SUPPORT
B&GC OF SAN BENITO 410 STOOKEY RD SAN BENITO, TX 78586-7778	74-1883973	501(C)(3)	49,313.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF THE GILA RIVER INDIAN COMMUN - 116 S. HOLLY ST. - SACATON, AZ 85147	86-0107023	501(C)(3)	49,266.	0.			GENERAL SUPPORT
B&GC OF CARBONDALE 250 N SPRINGER ST CARBONDALE, IL 62901-1426	37-1391223	501(C)(3)	49,244.	0.			GENERAL SUPPORT
B&GCS OF SOUTH COUNTY 847 ENCINA AVE IMPERIAL BEACH, CA 91932-2135	95-3667707	501(C)(3)	49,075.	0.			GENERAL SUPPORT
B&GC OF MARIMN HEALTH (BENEWAH MED. CTR) - 43935 S HWY 95 - WORLEY, ID 83876	82-0441207	501(C)(3)	48,810.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE BIG ISLAND - 100 KAMAKAHONU ST - HILO, HI 96720-2518	81-0575345	501(C)(3)	48,443.	0.			GENERAL SUPPORT
B&GC OF MILFORD 14 BENHAM AVE MILFORD, CT 06460-6001	27-0786009	501(C)(3)	46,918.	0.			GENERAL SUPPORT

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B&GC OF CLIFTON 822 CLIFTON AVE CLIFTON, NJ 07013-1816	22-1589377	501(C)(3)	46,882.	0.			GENERAL SUPPORT
B&GC OF THE WRAP PROJECT 902 MARTIN LUTHER KING BLVD WAGONER, OK 74467-6928	88-1193141	501(C)(3)	46,862.	0.			GENERAL SUPPORT
B&GCS OF THURSTON COUNTY 2424 HERITAGE CT SW, 301 OLYMPIA, WA 98502-6046	91-2124629	501(C)(3)	46,777.	0.			GENERAL SUPPORT
B&GC OF CHESTER 201 E 7TH ST CHESTER, PA 19013-6011	23-1490049	501(C)(3)	46,747.	0.			GENERAL SUPPORT
B&GCS OF SAN LUIS VALLEY 1115 10TH ST ALAMOSA, CO 81101	84-1215393	501(C)(3)	46,596.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF AGAI DICUTTA TUAMUHVI NOBE - PO BOX 220 - SCHURZ, NV 89427-0220	88-0139307	501(C)(3)	46,250.	0.			GENERAL SUPPORT
B&GC OF THE QUINULT INDIAN NATION 1214 AALIS DR TAHOLAH, WA 98587	91-0760952	501(C)(3)	45,948.	0.			GENERAL SUPPORT
B&GC OF KINGSVILLE 1238 E KENEDY AVE KINGSVILLE, TX 78363-5931	74-1499178	501(C)(3)	45,881.	0.			GENERAL SUPPORT
B&GCS OF NORTHERN WESTCHESTER 351 E MAIN ST MOUNT KISCO, NY 10549-3003	13-1739924	501(C)(3)	45,739.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GC OF GREATER NASHUA 10 EAST PEARL STREET NASHUA, NH 03060-3165	23-7058376	501(C)(3)	45,489.	0.			GENERAL SUPPORT
B&GC OF MANHATTAN 220 S 5TH ST MANHATTAN, KS 66502-6268	23-7358134	501(C)(3)	44,936.	0.			GENERAL SUPPORT
B&GCS OF METROWEST 169 PLEASANT ST MARLBOROUGH, MA 01752-1184	04-2387225	501(C)(3)	44,683.	0.			GENERAL SUPPORT
HICKAM AIR FORCE BASE YOUTH CENTER 915 NORTH RD HICKAM AIR FORCE BASE YOUTH CENTER BLDG. 161 - PEARL HARBOR, HI	53-0228403	501(C)(3)	44,209.	0.			GENERAL SUPPORT
B&GCS OF CONEJO & LAS VIRGENES, INC. - 1 DOLE DR. #3331 - WESTLAKE VILLAGE, CA 91362	91-2151731	501(C)(3)	43,961.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF HALIWA-SAPONI TRIBE - 228 CAPPs FARM RD - HOLLISTER, NC 27844-9316	23-7377602	501(C)(3)	43,793.	0.			GENERAL SUPPORT
B&GC OF THE MIDDLE GEORGIA REGION, INC. - 1381 2ND ST - DUDLEY, GA 31022	46-1362531	501(C)(3)	43,454.	0.			GENERAL SUPPORT
B&GCS OF ATHENS 705 FOURTH ST ATHENS, GA 30601-2276	58-0830085	501(C)(3)	43,389.	0.			GENERAL SUPPORT
MENIFEE VALLEY B&GC 26301 GARBANI RD MENIFEE, CA 92584-9480	46-2167670	501(C)(3)	43,134.	0.			GENERAL SUPPORT

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B&GC OF THE REDWOODS 3117 PROSPECT AVE EUREKA, CA 95503-5035	94-2184464	501(C)(3)	42,724.	0.			GENERAL SUPPORT
B&GC OF AUBURN 679 LINCOLN WAY AUBURN, CA 95603-4803	68-0321820	501(C)(3)	42,613.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF KUMEYAAY NATION WELLNESS - 4058 WILLOWS RD - ALPINE, CA 91901-1668	95-3782164	501(C)(3)	42,533.	0.			GENERAL SUPPORT
B&GC OF GALLUP 416 W PRINCETON AVE GALLUP, NM 87301-5200	31-1650341	501(C)(3)	42,482.	0.			GENERAL SUPPORT
B&GCS OF UNION COUNTY 1050 JEANETTE AVE UNION, NJ 07083-5909	22-1641962	501(C)(3)	42,252.	0.			GENERAL SUPPORT
JAMES L. MCKEOWN BOYS & GIRLS CLUB OF WOBURN, INC. - 1 CHARLES GARDNER LN - WOBURN, MA 01801-2383	04-2301953	501(C)(3)	41,794.	0.			GENERAL SUPPORT
B&GC OF THE NATIVE STAR FOUNDATION 1077 W MORTON AVE PORTERVILLE, CA 93257-1989	82-5289840	501(C)(3)	41,750.	0.			GENERAL SUPPORT
B&GCS OF THE LEWIS CLARK VALLEY 1021 BURRELL AVE LEWISTON, ID 83501-5467	82-6001432	501(C)(3)	40,616.	0.			GENERAL SUPPORT
B&GC OF VISTA 410 W CALIFORNIA AVE VISTA, CA 92083-3534	95-2266749	501(C)(3)	40,468.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GCS OF WELD COUNTY 2400 1ST AVE GREELEY, CO 80631-7440	84-0529902	501(C)(3)	40,420.	0.			GENERAL SUPPORT
B&GCS OF THE SEMINOLE TRIBE OF FLORIDA - 6353 N 30TH ST - HOLLYWOOD, FL 33024-2123	59-1415030	501(C)(3)	40,147.	0.			GENERAL SUPPORT
MNW B&GCS OF THOMAS COUNTY 219 FLETCHER ST THOMASVILLE, GA 31792-6028	58-2426833	501(C)(3)	40,097.	0.			GENERAL SUPPORT
MCAS MIRAMAR, YOUTH & TEEN CENTER 2700 MOORE AVE SAN DIEGO, CA 92145-2008	91-1761905	501(C)(3)	39,418.	0.			GENERAL SUPPORT
MARIANAS GUAM NAVY YOUTH CENTER #1982 - B HAPUTO SANTA RITA, GU 96915	84-2900114	501(C)(3)	39,175.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF THE DANVILLE AREA - 525 WILSON ST - DANVILLE, VA 24541-1437	54-1880308	501(C)(3)	38,824.	0.			GENERAL SUPPORT
B&GC OF SAN ANGELO 1802 LILLIE ST SAN ANGELO, TX 76903-4547	75-1216481	501(C)(3)	38,473.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF BARTLESVILLE 401 S SEMINOLE AVE BARTLESVILLE, OK 74003-3334	73-0618201	501(C)(3)	38,242.	0.			GENERAL SUPPORT
B&GC OF WESTERN TREASURE VALLEY 573 SW 3RD AVE, ODESSEY BUILDING ONTARIO, OR 97914	20-8035378	501(C)(3)	38,040.	0.			GENERAL SUPPORT

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B&GC OF SOUTHWESTERN OREGON 3333 WALNUT COOS BAY, OR 97420-0232	93-0816161	501(C)(3)	37,885.	0.			GENERAL SUPPORT
B&GCS OF JACKSON COUNTY 5343 JEFFERSON ST MOSS POINT, MS 39563-6242	58-2016844	501(C)(3)	37,305.	0.			GENERAL SUPPORT
B&GCS OF WEBER-DAVIS 2302 WASHINGTON BLVD, SUITE 200 OGDEN, UT 84401-1495	87-0660689	501(C)(3)	37,159.	0.			GENERAL SUPPORT
B&GC OF SOUTH SAN LUIS OBISPO COUNTY - 365 S 10TH ST - GROVER BEACH, CA 93433-2418	77-0390117	501(C)(3)	37,098.	0.			GENERAL SUPPORT
B&GCS OF NORTH CENTRAL FLORIDA 918 N WASHINGTON ST PERRY, FL 32347-2024	59-2973927	501(C)(3)	37,044.	0.			GENERAL SUPPORT
B&GC OF SANTA CRUZ COUNTY 590 N TYLER AVE NOGALES, AZ 85621-2300	86-0671818	501(C)(3)	36,894.	0.			GENERAL SUPPORT
B&GC OF FITCHBURG & LEOMINSTER 365 LINDELL AVE LEOMINSTER, MA 01453-5414	04-3576700	501(C)(3)	36,843.	0.			GENERAL SUPPORT
B&GC OF YUROK TRIBE 190 KLAMATH BLVD KLAMATH, CA 95548	68-0178020	501(C)(3)	36,250.	0.			GENERAL SUPPORT
MADISON SQUARE B&GC 250 BRADHURST AVE NEW YORK, NY 10039-1401	13-5596792	501(C)(3)	36,000.	0.			GENERAL SUPPORT

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B&GCS OF THE ALTAMAHA AREA 550 E ORANGE ST JESUP, GA 31546-4845	27-1041873	501(C)(3)	35,876.	0.			GENERAL SUPPORT
B&GCS OF BRIGHAM CITY 550 S MAIN ST BRIGHAM CITY, UT 84302-3245	87-0529606	501(C)(3)	35,696.	0.			GENERAL SUPPORT
CLIFF HAGAN B&GC 3415 BUCKLAND SQ OWENSBORO, KY 42301-5982	61-0663746	501(C)(3)	35,328.	0.			GENERAL SUPPORT
B&GC OF WESTERN BENTON COUNTY 655 HERITAGE COURT SILOAM SPRINGS, AR 72761-3912	62-1666732	501(C)(3)	34,345.	0.			GENERAL SUPPORT
SALVATION ARMY B&GC OF RICHMOND 2626 PENNSYLVANIA AVE NW WASHINGTON, DC 20037-1618	58-0660607	501(C)(3)	33,900.	0.			GENERAL SUPPORT
B&GCS OF EDINBURG RIO GRANDE VALLEY - 702 CULLEN ST - EDINBURG, TX 78541-8601	74-2549652	501(C)(3)	33,757.	0.			GENERAL SUPPORT
B&GCS OF SOUTHWEST MISSOURI 317 COMINGO AVE JOPLIN, MO 64801-2056	44-0627566	501(C)(3)	33,481.	0.			GENERAL SUPPORT
LUDLOW BOYS CLUB & GIRLS CLUB CORPORATION - 91 CLAUDIAS WAY - LUDLOW, MA 01056-3101	04-2089767	501(C)(3)	33,209.	0.			GENERAL SUPPORT
B&GC OF ROCHESTER 500 GENESEE ST ROCHESTER, NY 14611-3696	16-1001619	501(C)(3)	33,208.	0.			GENERAL SUPPORT

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SAN DIEGO CA NAVY YOUTH PROGRAMS 4867 SANTO RD, NAVAL BASE SAN DIEGO SAN DIEGO, CA 92124-2612	84-2900114	501(C)(3)	33,168.	0.			GENERAL SUPPORT
B&GC OF WILTON RANCHERIA 9728 KENT ST ELK GROVE, CA 95624-2453	20-1474428	501(C)(3)	33,058.	0.			GENERAL SUPPORT
B&GC OF GREATER LOWELL 657 MIDDLESEX ST LOWELL, MA 01851-1410	04-2104396	501(C)(3)	33,034.	0.			GENERAL SUPPORT
B&GCS OF GREATER PEORIA 806 E KANSAS ST PEORIA, IL 61603-2618	37-0800010	501(C)(3)	32,984.	0.			GENERAL SUPPORT
JOHN AVERY B&GC 808 E PETTIGREW ST DURHAM, NC 27701-3925	56-6001906	501(C)(3)	32,772.	0.			GENERAL SUPPORT
B&GCS OF THE COLUMBIA AREA 1200 N 7TH ST COLUMBIA, MO 65201-4514	43-1762116	501(C)(3)	32,583.	0.			GENERAL SUPPORT
B&GCS OF SOUTH CENTRAL TEXAS 400 UHLAND RD SAN MARCOS, TX 78666-6978	74-2729963	501(C)(3)	32,521.	0.			GENERAL SUPPORT
THE B&GCS OF THE BIG PINES 1500 POSITIVE PL MARSHALL, TX 75670-5571	75-2318241	501(C)(3)	32,363.	0.			GENERAL SUPPORT
CONCORD B&GC 55 BRADLEY ST CONCORD, NH 03301-6409	02-0259874	501(C)(3)	32,316.	0.			GENERAL SUPPORT

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B&GC OF LANGLADE COUNTY 411 SUPERIOR ST ANTIGO, WI 54409-1938	39-1980025	501(C)(3)	31,844.	0.			GENERAL SUPPORT
SHOSHONE BANNOCK TRIBE 306 PIMA DR FORT HALL, ID 83203	82-0197554	501(C)(3)	31,245.	0.			GENERAL SUPPORT
HELP COMMITTEE AND B&GC OF THE HI-LINE - 500 1ST AVE - HAVRE, MT 59501-3904	81-0408011	501(C)(3)	31,071.	0.			GENERAL SUPPORT
B&GC OF POPLAR BLUFF 1300 VICTORY LN POPLAR BLUFF, MO 63901-3300	43-1831638	501(C)(3)	30,990.	0.			GENERAL SUPPORT
BGC OF THE TRI-COUNTY AREA, INC 344 BROADWAY BERLIN, WI 54923-1708	82-0721270	501(C)(3)	30,813.	0.			GENERAL SUPPORT
B&GC OF HARRISONBURG 620 SIMMS AVE HARRISONBURG, VA 22802-4813	54-1652418	501(C)(3)	30,801.	0.			GENERAL SUPPORT
B&GC OF FRESNO AMERICAN INDIAN 1551 E SHAW AVE, SUITE 139 FRESNO, CA 93710-8024	45-1504597	501(C)(3)	30,636.	0.			GENERAL SUPPORT
B&GCS OF LINCOLN/LANCASTER COUNTY, INC. - 855 S 8TH ST - LINCOLN, NE 68508-3183	20-8677226	501(C)(3)	30,213.	0.			GENERAL SUPPORT
BOYS CLUB OF CICERO 5500 W 25TH ST CICERO, IL 60804-3318	36-2154018	501(C)(3)	30,156.	0.			GENERAL SUPPORT

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B&GC OF VALDOSTA 215 W NORTH ST VALDOSTA, GA 31601-4522	23-7067775	501(C)(3)	29,832.	0.			GENERAL SUPPORT
B&GC OF SANTA CRUZ 543 CENTER ST SANTA CRUZ, CA 95060-4337	94-6129075	501(C)(3)	29,831.	0.			GENERAL SUPPORT
B&GC OF TROY 3670 JOHN R RD TROY, MI 48083-5684	23-7390931	501(C)(3)	29,204.	0.			GENERAL SUPPORT
B&GC OF HAWTHORNE 150 MAITLAND AVE HAWTHORNE, NJ 07506-2646	23-7112349	501(C)(3)	29,006.	0.			GENERAL SUPPORT
B&GC OF WASHINGTON COUNTY 805 PENNSYLVANIA AVE HAGERSTOWN, MD 21742-3103	23-7252343	501(C)(3)	28,866.	0.			GENERAL SUPPORT
B&GC OF CAMDEN COUNTY 2 S. DUDLEY STREET CAMDEN, NJ 08105	22-3670025	501(C)(3)	28,840.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE OMAHA TRIBE OF NEBRASKA - 101 MAIN ST - MACY, NE 68039	47-0459805	501(C)(3)	28,791.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE SOUTHERN UTE INDIAN TRIBE - PO BOX 737 - IGNACIO, CO 81137-0737	84-0404384	501(C)(3)	28,729.	0.			GENERAL SUPPORT
B&GCS OF WARWICK 42 FREDERICK ST WARWICK, RI 02888-2211	05-6019193	501(C)(3)	28,338.	0.			GENERAL SUPPORT

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B&GC OF MONMOUTH COUNTY 1201 MONROE AVE ASBURY PARK, NJ 07712-6319	21-0694373	501(C)(3)	27,590.	0.			GENERAL SUPPORT
B&GC OF BEEVILLE 705 N TYLER ST BEEVILLE, TX 78102-4138	51-0211273	501(C)(3)	27,502.	0.			GENERAL SUPPORT
B&GCS OF BRAZOS VALLEY 900 W WILLIAM JOEL BRYAN PKWY BRYAN, TX 77803	74-6079584	501(C)(3)	27,477.	0.			GENERAL SUPPORT
BOYS CLUB OF SIOUX CITY 823 PEARL ST SIOUX CITY, IA 51101-1094	42-0940032	501(C)(3)	27,086.	0.			GENERAL SUPPORT
USAG HAWAII CYS SERVICES 350 EASTMAN RD, BLDG 547 WAAF SCHOFIELD, HI 96857-5002	99-6005407	501(C)(3)	26,979.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF NARRAGANSETT INDIAN TRIBE - 4533 S COUNTY TRL - CHARLESTOWN, RI 02813-3428	02-0656763	501(C)(3)	26,750.	0.			GENERAL SUPPORT
B&GC OF WESTMINSTER 14400 CHESTNUT ST WESTMINSTER, CA 92683-5004	95-2919799	501(C)(3)	26,741.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF CHICOPEE, INC. - 580 MEADOW ST - CHICOPEE, MA 01013-1879	04-2166805	501(C)(3)	26,730.	0.			GENERAL SUPPORT
SALVATION ARMY B&GC OF THE BLUEGRASS - 736 W MAIN ST - LEXINGTON, KY 40508-2020	13-5562351	501(C)(3)	26,649.	0.			GENERAL SUPPORT

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B&GC OF LYNN 25 N COMMON ST LYNN, MA 01902-4311	04-2103924	501(C)(3)	26,338.	0.			GENERAL SUPPORT
JEB LITTLE CREEK-FORT STORY 5720 INTEGRITY DR BLDG 457 MILLINGTON, TN 38054-5028	54-1971053	501(C)(3)	26,182.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF GREATER BILLERICA - 19 CAMPBELL RD - BILLERICA, MA 01821-2601	23-7106468	501(C)(3)	25,746.	0.			GENERAL SUPPORT
B&GCS OF SKAGIT COUNTY 1605 WILLIAM WAY, SUITE B MOUNT VERNON, WA 98273-5608	91-1670669	501(C)(3)	25,730.	0.			GENERAL SUPPORT
B&GC OF THE CAPITAL AREA 803 E DAKOTA AVE PIERRE, SD 57501-3312	14-1338574	501(C)(3)	25,574.	0.			GENERAL SUPPORT
B&GC OF BARTOW COUNTY 642 HENDERSON DR CARTERSVILLE, GA 30120-3737	58-1892111	501(C)(3)	25,495.	0.			GENERAL SUPPORT
LODI B&GC 275 POPLAR ST LODI, CA 95240-5938	94-1570121	501(C)(3)	24,912.	0.			GENERAL SUPPORT
B&GCS OF LAKE EUFAULA, INC. 446 SANFORD AVE EUFAULA, AL 36027-1450	26-4093561	501(C)(3)	24,897.	0.			GENERAL SUPPORT
B&GC OF BAD RIVER BANK OF LAKE SUPERI - 72682 MAPLE STREET - ASHLAND, WI 54806	39-1178897	501(C)(3)	24,785.	0.			GENERAL SUPPORT

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BOYS & GIRLS CLUB OF FOND DU LAC PO BOX 562 FOND DU LAC, WI 54936-0562	39-1896496	501(C)(3)	24,732.	0.			GENERAL SUPPORT
B&GC OF THE WISCONSIN RAPIDS AREA 501 17TH ST S WISCONSIN RAPIDS, WI 54494-5100	39-1745942	501(C)(3)	24,468.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF THE NORTHERN CHEYENNE NATION - PO BOX 309 - LAME DEER, MT 59043-0309	36-3945776	501(C)(3)	24,414.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF BETHLEHEM 1430 FRITZ DR BETHLEHEM, PA 18017	23-6298476	501(C)(3)	24,127.	0.			GENERAL SUPPORT
B&GC OF THE MISSISSIPPI DELTA 748 E FIFTEENTH ST YAZOO CITY, MS 39194-2706	45-0469376	501(C)(3)	24,033.	0.			GENERAL SUPPORT
B&GC OF THE COASTSIDE 600 CHURCH ST HALF MOON BAY, CA 94019-1904	94-3193725	501(C)(3)	24,022.	0.			GENERAL SUPPORT
B&GC OF STORY COUNTY, IOWA 210 S 5TH ST AMES, IA 50010-6821	42-0888428	501(C)(3)	23,748.	0.			GENERAL SUPPORT
B&GC OF THE GRAND STRAND 1000 DUNBAR ST MYRTLE BEACH, SC 29577-5632	57-1051611	501(C)(3)	23,608.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF MAGNOLIA PO BOX 811 MAGNOLIA, AR 71754-0811	71-0305932	501(C)(3)	22,966.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF CARLSBAD 1602 W FOX ST CARLSBAD, NM 88220-3744	85-0159171	501(C)(3)	22,794.	0.			GENERAL SUPPORT
D. A. R. B&GC 901 8TH AVENUE MENOMINEE, MI 49858-3138	38-1392687	501(C)(3)	22,785.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF GREATER SALEM PO BOX 24 SALEM, MA 01970-0024	04-2104912	501(C)(3)	22,638.	0.			GENERAL SUPPORT
B&GC OF GREATER WESTFIELD 28 W SILVER ST WESTFIELD, MA 01085-3627	04-2464259	501(C)(3)	22,606.	0.			GENERAL SUPPORT
WEST END HOUSE BOYS & GIRLS CLUB OF ALLSTON-BRIGHTON - 105 ALLSTON ST - BOSTON, MA 02134-5030	04-2105825	501(C)(3)	22,550.	0.			GENERAL SUPPORT
SOUTH SEBASTIAN COUNTY BOYS & GIRLS CLUB - 38 N HESTER CUT RD - GREENWOOD, AR 72936-0219	71-0430937	501(C)(3)	22,294.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF PICAYUNE RANCHERIA OF CHUKCHA - 49260 CHAPEL HILL DR. - OAKHURST, CA 93644-8773	77-0162118	501(C)(3)	22,193.	0.			GENERAL SUPPORT
B&GC OF MERIDEN 15 LINCOLN ST MERIDEN, CT 06451-3132	06-1013015	501(C)(3)	22,169.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF MARSHFIELD, INC. - 37 PROPRIETORS DR - MARSHFIELD, MA 02050-2172	04-3525938	501(C)(3)	22,166.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GC OF THE PLATEAU 42 COMMUNITY PLACE, SUITE 3 CASHIERS, NC 28717	46-5336895	501(C)(3)	22,035.	0.			GENERAL SUPPORT
FALLON PAIUTE-SHOSHONE TRIBE 8955 MISSION RD FALLON, NV 89406-7180	88-0120723	501(C)(3)	21,753.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL VIRGINIA 1000 CHERRY AVE CHARLOTTESVILLE, VA 22903-3491	54-1602004	501(C)(3)	21,709.	0.			GENERAL SUPPORT
NAS LEMOORE CA NAVY YOUTH PROGRAMS 995 NAS LEMOORE LEMOORE, CA 93245-5001	84-2900114	501(C)(3)	21,648.	0.			GENERAL SUPPORT
B&GC OF OAK RIDGE 102 S JEFFERSON CIR OAK RIDGE, TN 37830-4809	62-0589052	501(C)(3)	21,635.	0.			GENERAL SUPPORT
B&GCS OF BARRON COUNTY, INC. 426 N WILSON AVE RICE LAKE, WI 54868-1615	39-2025211	501(C)(3)	21,594.	0.			GENERAL SUPPORT
JBG LEWIS-MCCHORD CYS SERVICES 6397 GARCIA BLVD CYSS TEEN ZONE LEWIS MCCHORD, WA 98433	91-0976994	501(C)(3)	21,540.	0.			GENERAL SUPPORT
B&GC OF EAST AURORA 24 PAINE ST EAST AURORA, NY 14052-2308	16-0755732	501(C)(3)	21,326.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF HAMILTON 958 EAST AVE HAMILTON, OH 45011	31-0616383	501(C)(3)	21,304.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GC OF KOOTENAI COUNTY 200 W MULLAN AVE POST FALLS, ID 83854-7255	84-1635505	501(C)(3)	21,273.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF FREMONT COUNTY, INC. - PO BOX 1537 - CANON CITY, CO 81215-1537	27-1610981	501(C)(3)	21,268.	0.			GENERAL SUPPORT
B&GC OF CHAMBERSBURG AND SHIPPENSBURG - 20 E BURD ST. - SHIPPENSBURG, PA 17257-1328	27-1658752	501(C)(3)	21,257.	0.			GENERAL SUPPORT
B&GC OF BURLINGTON, INC. 62 OAK ST BURLINGTON, VT 05401-2830	03-0179307	501(C)(3)	20,935.	0.			GENERAL SUPPORT
B&GC OF CENTRAL PENNSYLVANIA 1227 BERRYHILL ST HARRISBURG, PA 17104-1706	23-1352043	501(C)(3)	20,439.	0.			GENERAL SUPPORT
B&GC OF NORTH LAKE TAHOE 8125 STEELHEAD KINGS BEACH, CA 96143-1617	31-1549603	501(C)(3)	20,416.	0.			GENERAL SUPPORT
B&GC OF BRISTOL 311 REBECCA ST BRISTOL, VA 24201-4343	54-0653489	501(C)(3)	20,177.	0.			GENERAL SUPPORT
ORRVILLE AREA B&GC 820 N ELLA ST ORRVILLE, OH 44667-1155	34-1003436	501(C)(3)	19,993.	0.			GENERAL SUPPORT
B&GC OF VERNON 2015 YAMPARIKA ST VERNON, TX 76384-6179	75-1052556	501(C)(3)	19,992.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GC OF ALBANY 1215 HILL ST SE ALBANY, OR 97322-3238	93-0549842	501(C)(3)	19,447.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE CUMBERLAND PLATEAU - 17025 ALBERTA ST - ONEIDA, TN 37841	20-5767918	501(C)(3)	19,031.	0.			GENERAL SUPPORT
B&GC OF ELIZABETHTON/CARTER COUNTY 104 HUDSON DR ELIZABETHTON, TN 37643-2802	62-0502737	501(C)(3)	18,967.	0.			GENERAL SUPPORT
B&GC OF WORCESTER 65 TAINTER ST WORCESTER, MA 01610-2520	04-2105851	501(C)(3)	18,886.	0.			GENERAL SUPPORT
B&GC FAMILY CENTER, INC. 100 ACORN ST SPRINGFIELD, MA 01109-2430	04-2105940	501(C)(3)	18,748.	0.			GENERAL SUPPORT
USAG FORT MOORE CYS SERVICES 1055 MCIVER STREET FORT BENNING, GA 31905	58-1076275	501(C)(3)	18,677.	0.			GENERAL SUPPORT
B&GCS OF WICHITA FALLS 1318 6TH ST WICHITA FALLS, TX 76301-2398	75-0883102	501(C)(3)	18,668.	0.			GENERAL SUPPORT
US COAST GUARD 1275 PEACHTREE ST NE ATLANTA, GA 30309-3580	52-0958685	501(C)(3)	18,665.	0.			GENERAL SUPPORT
B&GC OF SPARTA 1000 E MONTGOMERY ST SPARTA, WI 54656-1485	39-1798177	501(C)(3)	18,389.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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KINGSTON B&GCS, INC. 139 GREENKILL AVE KINGSTON, NY 12401-5400	14-1374487	501(C)(3)	18,106.	0.			GENERAL SUPPORT
B&GC OF OYSTER BAY-EAST NORWICH 1 PINE HOLLOW RD OYSTER BAY, NY 11771-4701	11-2136505	501(C)(3)	17,754.	0.			GENERAL SUPPORT
B&GCS OF THE WIREGRASS 457 S ALICE ST DOTHAN, AL 36301-2419	63-0422560	501(C)(3)	17,742.	0.			GENERAL SUPPORT
B&GC OF LOS FRESNOS 900 N ARROYO BLVD LOS FRESNOS, TX 78566-3109	74-2799966	501(C)(3)	17,704.	0.			GENERAL SUPPORT
B&GCS OF HOCAC NISOC HACI 105 BLUFF STREET WINNEBAGO, NE 68071	77-0648527	501(C)(3)	17,687.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF HIGHLANDS COUNTY - PO BOX 1596 - SEBRING, FL 33871-1596	59-3468588	501(C)(3)	17,406.	0.			GENERAL SUPPORT
RIDGEFIELD B&GC 41 GOVERNOR ST RIDGEFIELD, CT 06877-4608	06-0653182	501(C)(3)	17,358.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF GREATER SHASTA - 803 CEDAR ST - MOUNT SHASTA, CA 96067-2110	84-2095651	501(C)(3)	17,295.	0.			GENERAL SUPPORT
OSAN YOUTH CENTER AND TEEN CENTER 51 FSS/FSFY, UNIT 2065 APO, AA 96279-2065	53-0228403	501(C)(3)	17,250.	0.			GENERAL SUPPORT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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B&GCS OF THE LOWCOUNTRY 10 PINCKNEY COLONY RD, SUITE 103 BLUFFTON, SC 29909-4126	57-0811876	501(C)(3)	17,104.	0.			GENERAL SUPPORT
B&GC OF GREATER LYNCHBURG 1101 MADISON ST LYNCHBURG, VA 24504-2517	20-0199894	501(C)(3)	16,936.	0.			GENERAL SUPPORT
B&GC OF GREATER FLINT 3701 N AVERILL AVE FLINT, MI 48506-2511	38-3381808	501(C)(3)	16,683.	0.			GENERAL SUPPORT
B&GC OF HOPKINSVILLE - CHRISTIAN COUNTY - 1600 S WALNUT ST - HOPKINSVILLE, KY 42240-4272	20-2103260	501(C)(3)	16,660.	0.			GENERAL SUPPORT
GLEN COVE B&GC AT LINCOLN HOUSE 113 GLEN COVE AVE GLEN COVE, NY 11542-3438	11-1673938	501(C)(3)	16,567.	0.			GENERAL SUPPORT
B&GC OF BRATTLEBORO, INC. 17 FLAT ST BRATTLEBORO, VT 05301-3247	03-0309528	501(C)(3)	16,465.	0.			GENERAL SUPPORT
PINOLEVILLE POMO NATION B&GC 500 PINOEVILLE RD UKIAH, CA 95482-7121	68-0043296	501(C)(3)	16,348.	0.			GENERAL SUPPORT
B&GC OF PITTSFIELD 16 MELVILLE ST PITTSFIELD, MA 01201	04-2103925	501(C)(3)	16,167.	0.			GENERAL SUPPORT
B&GC OF THE ARKANSAS RIVER VALLEY 600 E 16TH ST RUSSELLVILLE, AR 72801-5110	71-0681999	501(C)(3)	16,026.	0.			GENERAL SUPPORT

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BOYS & GIRLS CLUBS OF GLACIER COUNTRY (KALISPELL) - PO BOX 961 - COLUMBIA FLS, MT 59912-0961	81-0531133	501(C)(3)	15,877.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF MERCED COUNTY 615 W 15TH ST MERCED, CA 95340-5960	77-0357487	501(C)(3)	15,702.	0.			GENERAL SUPPORT
SALVATION ARMY B&GC/& SR. CITIZENS CLUB OF NEWARK - 11 PROVIDENCE ST - NEWARK, NJ 07105-3717	13-5562351	501(C)(3)	15,649.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF IMPERIAL VALLEY - PO BOX 1277 - BRAWLEY, CA 92227-1277	95-2470230	501(C)(3)	15,619.	0.			GENERAL SUPPORT
PRESIDIO OF MONTEREY CYS SERVICES PO BOX 1819 SEASIDE, CA 93955-1819	94-2358495	501(C)(3)	15,543.	0.			GENERAL SUPPORT
YOUTH ACTIVITY CENTER - LAUGHLIN AFB - 652 MITCHELL BLVD., BLDG. 390 - LAUGHLIN AFB, TX 78843-5134	53-0228403	501(C)(3)	15,382.	0.			GENERAL SUPPORT
JBER-FT RICHARDSON YOUTH PROGRAM 600 RICHARDSON DR JBER, AK 99505-8310	53-0228403	501(C)(3)	15,238.	0.			GENERAL SUPPORT
B&GC OF NEWPORT CO. 95 CHURCH STREET NEWPORT, RI 02840-3143	05-0281572	501(C)(3)	15,136.	0.			GENERAL SUPPORT
B&GCS OF NORTH SAN MATEO COUNTY 201 W ORANGE AVE SOUTH SAN FRANCISCO, CA 94080-4445	94-1497000	501(C)(3)	15,094.	0.			GENERAL SUPPORT

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BOYS & GIRLS CLUBS OF THE NORTHTOWNS - 54 RIVERDALE AVE - BUFFALO, NY 14207	16-0755733	501(C)(3)	15,000.	0.			GENERAL SUPPORT
OSCAR CROSS BOYS & GIRLS CLUB OF PADUCAH, INC. - PO BOX 203 - PADUCAH, KY 42002-0203	61-1001392	501(C)(3)	14,903.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE MAKAH TRIBE - 1410 BAYVIEW AVE - NEAH BAY, WA 98357-0115	91-0492517	501(C)(3)	14,866.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF GLASGOW/BARREN COUNTY - PO BOX 1935 - GLASGOW, KY 42142-1935	45-4693954	501(C)(3)	14,802.	0.			GENERAL SUPPORT
B&GC OF DAYTON 1828 W STEWART ST DAYTON, OH 45417-3741	31-0536657	501(C)(3)	14,586.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF CENTRAL ARIZONA - 335 E AUBREY - PRESCOTT, AZ 86303-4305	86-0964489	501(C)(3)	14,519.	0.			GENERAL SUPPORT
B&GC OF BUENA PARK 7758 KNOTT AVE BUENA PARK, CA 90620-2420	95-1808525	501(C)(3)	14,511.	0.			GENERAL SUPPORT
B&GC OF THE CAPITAL CITY 1105 LAFAYETTE STREET JEFFERSON CITY, MO 65101	43-1733063	501(C)(3)	14,488.	0.			GENERAL SUPPORT
B&GCS OF CENTRAL-SOUTHWEST IOWA 807 BROAD ST. ADAIR, IA 50002-7745	42-1506920	501(C)(3)	14,486.	0.			GENERAL SUPPORT

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BOYS & GIRLS CLUB OF THE UMPQUA VALLEY - 1144 NE CEDAR ST - ROSEBURG, OR 97470	91-1788798	501(C)(3)	14,467.	0.			GENERAL SUPPORT
USAG FORT JOHNSON CYS SERVICES 6880 RADIO RD FORT POLK, LA 71459-5221		501(C)(3)	14,322.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE TULE RIVER TRIBE'S FUTURE GENERATIONS - 340 N RESERVATION RD - PORTERVILLE, CA 93257-9673	94-1728348	501(C)(3)	14,199.	0.			GENERAL SUPPORT
MOUNTAIN HOME AFB YOUTH CENTER 480 5TH ST. MTN. HOME AFB, ID 83648-5098	53-0228403	501(C)(3)	14,165.	0.			GENERAL SUPPORT
B&GC OF GREENWICH 4 HORSENECK LN GREENWICH, CT 06830-6399	06-0646655	501(C)(3)	14,112.	0.			GENERAL SUPPORT
B&GC OF VINELAND 560 CRYSTAL AVE VINELAND, NJ 08360-2843	22-3604451	501(C)(3)	13,949.	0.			GENERAL SUPPORT
B&GC OF EDEN 1026 HARRIS ST EDEN, NC 27288-6303	56-0711026	501(C)(3)	13,939.	0.			GENERAL SUPPORT
B&GC OF OSHKOSH 501 E PARKWAY AVE OSHKOSH, WI 54901-4650	39-6120658	501(C)(3)	13,869.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF FAUQUIER 99 ALEXANDRIA PIKE, SUITE 35 WARRENTON, VA 20186-2835	54-1815587	501(C)(3)	13,863.	0.			GENERAL SUPPORT

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B&GC OF FRANKLIN-SIMPSON COUNTY, KENTUCKY, INC. - 103 S COURT ST - FRANKLIN, KY 42134-2117	61-1423661	501(C)(3)	13,722.	0.			GENERAL SUPPORT
KIRTLAND AFB YOUTH PROGRAM 8001 'G' AVE ALBUQUERQUE, NM 87117-0001	53-0228403	501(C)(3)	13,648.	0.			GENERAL SUPPORT
WALTHAM B&GC 20 EXCHANGE ST WALTHAM, MA 02451-4498	04-2103927	501(C)(3)	13,527.	0.			GENERAL SUPPORT
LUKE AIR FORCE BASE YOUTH CENTER 7383 N LITCHFIELD RD LUKE AFB, AZ 85309-1500	86-0115822	501(C)(3)	13,485.	0.			GENERAL SUPPORT
HOLLOMAN AFB YOUTH PROGRAM 226 PATTERSON DR HOLLOMAN AFB, NM 88330	53-0228403	501(C)(3)	13,298.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF MANTECA PO BOX 1061 MANTECA, CA 95336	94-2751177	501(C)(3)	13,297.	0.			GENERAL SUPPORT
B&GC OF THE YAKAMA NATION 401 FORT RD TOPPENISH, WA 98948	32-0682002	501(C)(3)	13,250.	0.			GENERAL SUPPORT
USAG ROCK ISLAND ARSENAL CYS SERVICES - SCHOOL AGE & YOUTH CENTER - ROCK ISLAND, IL 61299-5000	36-3523797	501(C)(3)	13,074.	0.			GENERAL SUPPORT
PORTSMOUTH NAVAL SHIPYARD CODE 821 MWR KITTEERY, ME 03904	84-2900114	501(C)(3)	13,038.	0.			GENERAL SUPPORT

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RAF LAKENHEATH YOUTH PROGRAM UNIT 5200, BOX 335 APO, AA 09464	53-0228403	501(C)(3)	13,000.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF WAYNESBORO, STAUNTON, AND AUGUSTA COUNTY - PO BOX 382 - WAYNESBORO, VA 22980	54-1848714	501(C)(3)	12,979.	0.			GENERAL SUPPORT
TINKER YOUTH CENTER 4460 MCNARNEY TINKER AFB, OK 73145	53-0228403	501(C)(3)	12,929.	0.			GENERAL SUPPORT
PETERSON AFB YOUTH PROGRAM 125 E STEWART AVE PETERSON AFB, CO 80914-1630	84-0617273	501(C)(3)	12,889.	0.			GENERAL SUPPORT
USAG FORT BUCHANAN CYS SERVICES GARCIA ST.; ATTN: IMSE-BUC-MWC; BLDG 1020 A/B - FORT BUCHANAN, PR 00934	66-0772032	501(C)(3)	12,862.	0.			GENERAL SUPPORT
ANDERSEN AIR FORCE BASE 36 FSS/FSF APO, AA 96543-4004	53-0228403	501(C)(3)	12,700.	0.			GENERAL SUPPORT
JOHN W. HEREFORD B&GC OF HUNTINGTON - 520 EVERETT ST - HUNTINGTON, WV 25702-1914	56-6679545	501(C)(3)	12,499.	0.			GENERAL SUPPORT
B&GC OF MASSILLON 730 DUNCAN ST SW MASSILLON, OH 44647-7960	34-0726102	501(C)(3)	12,484.	0.			GENERAL SUPPORT
JB CHARLESTON YOUTH PROGRAM 2451 N ONEAL AVE CHARLESTON, SC 29404-2120	53-0228403	501(C)(3)	12,453.	0.			GENERAL SUPPORT

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BGC OF THE HOOPA VALLEY TRIBE 11756 STATE HIGHWAY 96 HOOPA, CA 95546	94-1477040	501(C)(3)	12,097.	0.			GENERAL SUPPORT
B&GCS OF GREATER HIGH POINT 314 BARKER AVE HIGH POINT, NC 27262-6919	56-2094591	501(C)(3)	12,045.	0.			GENERAL SUPPORT
B&GC OF UKIAH 1640 S STATE ST UKIAH, CA 95482-3937	68-0340783	501(C)(3)	12,043.	0.			GENERAL SUPPORT
VOGELWEH YOUTH PROGRAM UNIT 321 APO, AA 09094-3240	53-0228403	501(C)(3)	12,000.	0.			GENERAL SUPPORT
USAG VICENZA CYS SERVICES 4700 YUMA CIR, 11 FSS/FSFY ANDREWS AFB, MD 20762-5584	13-1837418	501(C)(3)	12,000.	0.			GENERAL SUPPORT
WINIFRED CRAWFORD DIBERT B&GC OF JAMESTOWN - 351 E MAIN ST - MOUNT KISCO, NY 10549-3003	16-0743055	501(C)(3)	11,936.	0.			GENERAL SUPPORT
B&GCS OF THE CEDAR VALLEY 515 LIME ST WATERLOO, IA 50703-3804	42-6083723	501(C)(3)	11,908.	0.			GENERAL SUPPORT
B&GCS OF SCHENECTADY 104 EDUCATION DR SCHENECTADY, NY 12303	14-1364595	501(C)(3)	11,808.	0.			GENERAL SUPPORT
B&GC OF WEST CHESTER/LIBERTY, THE 8749 CINCINNATI DAYTON RD WEST CHESTER, OH 45069-3136	46-3631593	501(C)(3)	11,771.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF THE NEZ PERCE TRIBE 104 AGENCY RD LAPWAI, ID 83540	82-0255928	501(C)(3)	11,685.	0.			GENERAL SUPPORT
VACAVILLE NEIGHBORHOOD B&GC 100 HOLLY LN VACAVILLE, CA 95688-2202	13-4223488	501(C)(3)	11,594.	0.			GENERAL SUPPORT
BGC OF IOWA TRIBE OF KANSAS & NE 2169 IOWA DR WHITE CLOUD, KS 66094	48-0799251	501(C)(3)	11,567.	0.			GENERAL SUPPORT
B&GCS OF SONOMA VALLEY 100 W VERANO AVE SONOMA, CA 95476-5362	94-1579901	501(C)(3)	11,282.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF DANVILLE 850 N GRIFFIN ST DANVILLE, IL 61832-3306	37-1275690	501(C)(3)	11,252.	0.			GENERAL SUPPORT
PICURIS PUEBLO 201-A PUEBLO VIEW PICURIS PUEBLO, NM 87553	85-0258099	501(C)(3)	11,250.	0.			GENERAL SUPPORT
B&GCS OF SYRACUSE 2100 E FAYETTE ST SYRACUSE, NY 13224-1017	15-0532240	501(C)(3)	11,116.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF JACKSONVILLE PO BOX 14 JACKSONVILLE, AR 72078-0014	27-2480374	501(C)(3)	10,799.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF ROUND VALLEY INDIAN HEALTH CE - 76471 HENDERSON LANE - COVELO, CA 95428	27-5238993	501(C)(3)	10,750.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DAVIS-MONTHAN YOUTH CENTER 5915 E QUIJOTA BLVD, BLDG 6000 DM AFB, AZ 85707-4235	53-0228403	501(C)(3)	10,485.	0.			GENERAL SUPPORT
ANDREWS AIR FORCE BASE YOUTH CENTER - 46983 HINKLE CIR, BLDG 1597 - PATUXENT RIVER, MD 20670-1126	75-1744396	501(C)(3)	10,476.	0.			GENERAL SUPPORT
B&GC OF MISSION 209 W 18TH ST MISSION, TX 78572-2803	75-6157015	501(C)(3)	10,193.	0.			GENERAL SUPPORT
NAS OCEANA CHILD & YOUTH PROG (CYP) - 872 HORNET DR. BLDG 526 - VIRGINIA BEACH, VA 23460-2151	84-2900114	501(C)(3)	10,182.	0.			GENERAL SUPPORT
USAG FORT CAMPBELL CYS SERVICES T39 INDIANA AVE FORT CAMPBELL, KY 42223-3567	75-1744396	501(C)(3)	10,055.	0.			GENERAL SUPPORT
BOYS AND GIRLS CLUBS OF CANADA 2005 SHEPPARD AVE EAST, SUITE 400 TORONTO, ON, CANADA M2J 5B4	30-0108263	501(C)(3)	10,000.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF CHIPPEWA CREE TRIBE OF THE ROCKY BOY RESERVATION - 6850 UPPER BOX ELDER RD - BOX ELDER, MT 59521-9073	81-0349437	501(C)(3)	9,862.	0.			GENERAL SUPPORT
CHILDREN AND YOUTH PROGRAMS, CAMP PENDLETON - PO BOX 555020 - CMP PENDLETON, CA 92055-5016	33-0328485	501(C)(3)	9,668.	0.			GENERAL SUPPORT
B&GCS OF THE GREATER COOK COUNTY AREA - 1200 N HUTCHINSON AVE - ADEL, GA 31620-1185	75-3214885	501(C)(3)	9,655.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF BULLOCH COUNTY 515 DENMARK ST, STE 1200 STATESBORO, GA 30458-0972	58-2606951	501(C)(3)	9,634.	0.			GENERAL SUPPORT
B&GCS OF EAST TEXAS 1909 S BROADWAY AVE TYLER, TX 75701-4241	75-2541408	501(C)(3)	9,565.	0.			GENERAL SUPPORT
B&GC OF BIG VALLEY RANCHERIA 2726 MISSION RANCHERIA RD LAKEPORT, CA 95453-9612	68-0091190	501(C)(3)	9,504.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF THE WUKCHUMNI TRIBE - 1926 S CONYER ST - VISALIA, CA 93277-4617	86-3020566	501(C)(3)	9,500.	0.			GENERAL SUPPORT
HICKSVILLE YOUTH COUNCIL'S B&GC 79 W OLD COUNTRY RD HICKSVILLE, NY 11801-4003	11-2287963	501(C)(3)	9,455.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF SOUTHWEST ALABAMA - 149 ADAMS AVE - THOMASVILLE, AL 36784-5301	72-1363534	501(C)(3)	9,420.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF GREATER WEST PLAINS - 613 W 1ST ST - WEST PLAINS, MO 65775-2617	27-4455082	501(C)(3)	9,293.	0.			GENERAL SUPPORT
HANSCOM AIR FORCE BASE YOUTH CENTER - 20 SCHILLING CIR, 66 FSS/FSFY - HANSCOM AFB,, MA 01731	53-0228403	501(C)(3)	9,237.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF THE MONDAK 201 3RD AVE SE SIDNEY, MT 59270-4325	11-3694698	501(C)(3)	9,168.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF THE RED RIVER VALLEY 1530 1ST ST NE PARIS, TX 75460-2610	75-0800621	501(C)(3)	9,051.	0.			GENERAL SUPPORT
B&GCS OF NORTHWEST NEW JERSEY, INC. - 153 GARSIDE AVE - WAYNE, NJ 07470-2414	22-2169444	501(C)(3)	9,029.	0.			GENERAL SUPPORT
NAVAL SUPPORT ACTIVITY ANNAPOLIS 354 ALDER ROAD ANNAPOLIS, MD 21402	84-2900114	501(C)(3)	8,976.	0.			GENERAL SUPPORT
WEST POINT CYS SERVICES 500 WASHINGTON RD WEST POINT, NY 10996-1327	14-1430437	501(C)(3)	8,969.	0.			GENERAL SUPPORT
B&GCS OF VICTORIA 202 HOPKINS ST VICTORIA, TX 77901-8470	74-6104461	501(C)(3)	8,930.	0.			GENERAL SUPPORT
USAG FORT LIBERTY CYS SERVICES PO B O X 70122 FORT BRAGG, NC 28310-0001	56-1602987	501(C)(3)	8,925.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF MCGEHEE PO BOX 495 MCGEHEE, AR 71654-0495	71-0813343	501(C)(3)	8,864.	0.			GENERAL SUPPORT
USAG FORT BELVOIR CYS SERVICES 5850 LANGFITT LOOP, BUILDING 1003 FORT BELVOIR, VA 22060-5532	51-0620372	501(C)(3)	8,682.	0.			GENERAL SUPPORT
HILL AIR FORCE BASE YOUTH ACTIVITIES CENTER - 7285 4TH ST, SUITE 204 - HILL AFB, UT 84056-5204	53-0228403	501(C)(3)	8,608.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALESIAN BOYS & GIRLS CLUB, INC. 150 BYRON ST EAST BOSTON, MA 02128-3058	04-2558218	501(C)(3)	8,550.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF PAWTUCKET 1 MOELLER PL PAWTUCKET, RI 02860-5775	05-0258924	501(C)(3)	8,508.	0.			GENERAL SUPPORT
USAG FORT DETRICK CYS SERVICES 955 SULTAN DR FORT DETRICK, MD 21702-9231	52-0683468	501(C)(3)	8,456.	0.			GENERAL SUPPORT
NAVAL SUPPORT ACTIVITY INDIAN HEAD 3992 STARK RD INDIAN HEAD, MD 20640-5142	84-2900114	501(C)(3)	8,456.	0.			GENERAL SUPPORT
B&GC OF GREATER VERGENNES 20 ARMORY LN VERGENNES, VT 05491-1300	03-0359691	501(C)(3)	8,451.	0.			GENERAL SUPPORT
JBG MYER-HENDERSON HALL CYS SERVICES - 102 CARPENTER RD JOINT BASE MYER-HENDERSON BLDG. 483 - FORT MYER, VA 22211-1228	20-5501209	501(C)(3)	8,412.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF GREATER LA CROSSE - 1331 CLINTON ST - LA CROSSE, WI 54603-2748	39-6084791	501(C)(3)	8,325.	0.			GENERAL SUPPORT
MARINE CORPS BASE HAWAII BLDG. 1090B KANEHOE BAY, HI 96863-3073	99-0267668	501(C)(3)	8,229.	0.			GENERAL SUPPORT
WRIGHT PATTERSON AIR FORCE BASE YOUTH CENTER - 5215 THURLOW ST - DAYTON, OH 45433-5547	31-0649564	501(C)(3)	8,215.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B&GC OF THE PONTOTOC COUNTY PEAK INC. - 915 S HICKORY ST - ADA, OK 74820-8000	73-0724464	501(C)(3)	8,130.	0.			GENERAL SUPPORT
USAG FORT SILL CYS SERVICES 1010 FORT SILL BLVD FORT SILL, OK 73503-4493	11-3782656	501(C)(3)	8,055.	0.			GENERAL SUPPORT
BGC OF THE RED CLIFF BAND OF LAKE SUPERIOR CHIPPEW - 88455 PIKE RD - BAYFIELD, WI 54814-4741	39-1178866	501(C)(3)	8,016.	0.			GENERAL SUPPORT
FLEET ACTIVITIES SASEBO PSC 476 BOX 5 FPO, AA 96322-0001	84-2900114	501(C)(3)	8,000.	0.			GENERAL SUPPORT
BEALE AIR FORCE BASE YOUTH CENTER 6249 C ST 9 FSS/FSFY BEALE AFB, CA 95903-1613	53-0228403	501(C)(3)	7,918.	0.			GENERAL SUPPORT
NAVAL SUPPORT ACTIVITY DAHLGREN 17267 DAHLGREN RD DAHLGREN, VA 22448-5125	84-2900114	501(C)(3)	7,818.	0.			GENERAL SUPPORT
B&GC OF GARFIELD 490 MIDLAND AVE GARFIELD, NJ 07026-1606	22-1660518	501(C)(3)	7,792.	0.			GENERAL SUPPORT
USAG FORT GORDON CYS SERVICES 45410 46TH STREET FORT GORDON, GA 30905-2605	75-1744396	501(C)(3)	7,657.	0.			GENERAL SUPPORT
HURLBURT FIELD YOUTH PROGRAM 117 MCMILLAN ST HURLBURT FLD, FL 32544-1073	84-2900114	501(C)(3)	7,628.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUB OF CLEVELAND COUNTY - PO BOX 2001 - SHELBY, NC 28151-2001	56-0858863	501(C)(3)	7,542.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF BREA-PLACENTIA-YORBA LINDA - 502 SIEVERS AVE - BREA, CA 92821-5357	95-2428410	501(C)(3)	7,538.	0.			GENERAL SUPPORT
NAVAL STATION GUANTANAMO BAY PSC 1005 BOX 19 FPO, AA 09593-0001	84-2900114	501(C)(3)	7,500.	0.			GENERAL SUPPORT
NANTUCKET BOYS & GIRLS CLUB, INC. PO BOX 269 NANTUCKET, MA 02554-0269	04-6114678	501(C)(3)	7,476.	0.			GENERAL SUPPORT
B&GC OF CATAWBA NATION 996 AVENUE OF THE NATIONS ROCK HILL, SC 29730-7645	57-1001665	501(C)(3)	7,470.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF DINE' YOUTH 1 MORGAN BLVD.; NAVAJO EDUCATION CENTER, ROOM 111 - WINDOW ROCK, AZ 86515	86-0092335	501(C)(3)	7,401.	0.			GENERAL SUPPORT
B&GC OF SOUTH LOGAN COUNTY 751 N KENNEDY AVE BOONEVILLE, AR 72927-3241	71-0848678	501(C)(3)	7,136.	0.			GENERAL SUPPORT
B&GCS OF NORTH CENTRAL NORTH CAROLINA - 105 WEST ST - OXFORD, NC 27565-2942	56-2525793	501(C)(3)	7,102.	0.			GENERAL SUPPORT
B&GC OF CUMBERLAND-LINCOLN 1 JAMES J MCKEE WAY CUMBERLAND, RI 02864-5342	05-0280121	501(C)(3)	7,083.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUB OF BLACKFEET MANPOWER - 409 N PIEGAN ST - BROWNING, MT 59417	13-5562976	501(C)(3)	7,000.	0.			GENERAL SUPPORT
MCAS YUMA YOUTH CENTER 1050 MARTINI AVE; MCAS YUMA, AZ 85369	33-0328484	501(C)(3)	6,985.	0.			GENERAL SUPPORT
NSA NORFOLK NAVAL SHIPYARD 5720 INTEGRITY DR MILLINGTON, TN 38054-5028	54-1227908	501(C)(3)	6,932.	0.			GENERAL SUPPORT
JBER-ELMENDORF YOUTH PROGRAM 600 RICHARDSON DR JBER, AK 99505-8310	53-0228403	501(C)(3)	6,718.	0.			GENERAL SUPPORT
NAVAL AIR STATION PENSACOLA 4118 CHILDREN'S WAY PENSACOLA, FL 32511-0001	84-2900114	501(C)(3)	6,603.	0.			GENERAL SUPPORT
B&GC OF THE EASTERN SHOSHONE TRIBE 19 NORTH FORK RD FORT WASHAKIE, WY 82514	83-0261946	501(C)(3)	6,593.	0.			GENERAL SUPPORT
USAG FORT HAMILTON CYS SERVICES 218 MARSHALL DR BROOKLYN, NY 11252-9515	75-1360092	501(C)(3)	6,469.	0.			GENERAL SUPPORT
MAXWELL-GUNTER AFB YOUTH PROGRAM 351 E. MAXWELL BLVD #1 MAXWELL AFB, AL 36112-5951	53-0228403	501(C)(3)	6,216.	0.			GENERAL SUPPORT
USAG GORT GREGG-ADAMS CYS SERVICES (FORT LEE) - 10619 YORKTOWN DR., CYSS COORDINATOR - FORT LEE, VA 23801	13-1837418	501(C)(3)	6,182.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOODY AFB YOUTH PROGRAM 1804 PREWITTE STREET MOODY AFB, GA 31699-0001	53-0228403	501(C)(3)	6,177.	0.			GENERAL SUPPORT
CASTLE X YOUTH CENTER 1 ADMINISTRATION CIR CHINA & YOUTH PROGRAMS KING ST. BLDG 880 ROOM 1 - RIDGE	84-2900114	501(C)(3)	6,168.	0.			GENERAL SUPPORT
NAVAL BASE VENTURA COUNTY PT. MUGU YOUTH ACTV CTR - 150 FOURTH ST. - PT MUGU, CA 93042	84-2900114	501(C)(3)	6,168.	0.			GENERAL SUPPORT
NAVAL BASE SAN DIEGO 4867 SANTO RD SAN DIEGO, CA 92124-2612	84-2900114	501(C)(3)	6,168.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF WASHINGTON COUNTY - PO BOX 1952 - BRENHAM, TX 77834-1952	75-3071779	501(C)(3)	6,073.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF CATHEDRAL CITY - 32141 WHISPERING PALMS TRL - CATHEDRAL CITY, CA 92234	95-3507225	501(C)(3)	6,044.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUB OF SOUTHWEST MONTANA - 3864 BAXTER LN - BOZEMAN, MT 59718-8054	81-6013668	501(C)(3)	6,030.	0.			GENERAL SUPPORT
B&GC OF IWAKUNI PSC 561 B O X 1863 PERSONAL SERVICE FPO, AA 96310	52-1617915	501(C)(3)	6,000.	0.			GENERAL SUPPORT
B&GCS OF GREATER KALAMAZOO 4000 PORTAGE ST, SUITE 201 KALAMAZOO, MI 49001-6900	38-1627080	501(C)(3)	5,888.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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LEJEUNE-NEW RIVER CHILD & YOUTH PROGRAM - 1401 WEST RD - CAMP LEJEUNE, NC 28547-2539	56-1633023	501(C)(3)	5,721.	0.			GENERAL SUPPORT
USAG DETROIT ARSENAL CYS SERVICES 6501 E. 11 MILE ROAD (1); BLDG 273 WARREN, MI 48397-0001	56-2340331	501(C)(3)	5,644.	0.			GENERAL SUPPORT
JB CHARLESTON-NAS YOUTH PROGRAM 2316 RED BANK RD GOOSE CREEK, SC 29445-8600	53-0228403	501(C)(3)	5,507.	0.			GENERAL SUPPORT
B&GC OF JOHNSON CITY/WASHINGTON COUNTY - 2210 W MARKET ST - JOHNSON CITY, TN 37604-6041	62-0810733	501(C)(3)	5,242.	0.			GENERAL SUPPORT
USAG FORT WAINWRIGHT CYS SERVICES HQ USAR-AK FT WAINWRIGHT, AK 99703-5001	54-1919272	501(C)(3)	5,238.	0.			GENERAL SUPPORT
B&GC OF DECATUR 859 N JASPER ST. DECATUR, IL 62521-1349	23-7350999	501(C)(3)	5,150.	0.			GENERAL SUPPORT
B&GC OF PHILLIPS COUNTY 8 PLAZA STREET WEST HELENA, AR 72390-2346	06-1757016	501(C)(3)	5,052.	0.			GENERAL SUPPORT
B&GCS OF THE THREE AFFILIATED TRIBES - 710 EAST AVENUE - NEW TOWN, ND 58763	91-2184912	501(C)(3)	5,047.	0.			GENERAL SUPPORT

Schedule I (Form 990)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	198	1,171,392.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

BOYS & GIRLS CLUBS OF AMERICA ("BGCA") STRIVES TO PROVIDE ONGOING AND EFFECTIVE TECHNICAL ASSISTANCE, INFORMATION, SYSTEMS AND MONITORING SO AS TO HELP ENSURE THAT BGCA AND LOCAL CLUBS RECEIVING PASS-THROUGH GRANTS FROM BGCA MAKE FULL AND COMPLIANT USE OF ALL FUNDS ENTRUSTED TO BGCA - FEDERAL AND NON-FEDERAL. FOR THE LIFE OF THE GRANT, CONTRACT, ETC., THE FINANCIAL/LEGAL SERVICES, SERVICES TO CLUBS AND FEDERAL GRANTS DEPARTMENTS PROVIDE COMPLIANCE AND FISCAL MANAGEMENT RELATED GUIDANCE AND OVERSIGHT. THE PROGRAM SPONSORING DEPARTMENT IS ALSO INVOLVED IN THESE AREAS AND IS PRIMARILY RESPONSIBLE FOR THE PROGRAMMATIC ACTIVITIES AND OUTCOMES. THROUGHOUT THE PROCESS, INFORMATION AND EDUCATION IS PROVIDED TO CLUB REPRESENTATIVES THROUGH, FOR EXAMPLE, THE FUNDING ANNOUNCEMENT PACKET; GRANT ADMINISTRATION TRAININGS; ONLINE VIA WWW.BGCA.NET; LETTERS OF AGREEMENT; AND ESPECIALLY VIA BGCA STAFF IN FEDERAL GRANTS, FINANCIAL SERVICES, SERVICES TO CLUBS AND GOVERNMENT RELATIONS. BGCA STAFF CONTINUALLY MONITOR THE FINANCIAL AND PROGRAMMATIC PERFORMANCE OF SUB-RECIPIENTS THROUGH CLUB FINANCIAL REPORTS, CLUB PROGRAM REPORTS, DIRECT COMMUNICATIONS WITH CLUBS, SITE VISITS, ETC. WHEN GRANTS ARE AWARDED TO

Part IV Supplemental Information

CLUBS ON A REIMBURSEMENT BASIS (I.E. FEDERAL GRANTS), REQUESTS FOR EXPENDITURES ARE THOROUGHLY REVIEWED FOR ACCURACY, ALLOWABILITY AND APPROPRIATENESS PER AGREED UPON BUDGETS AND PROGRAM DELIVERABLES THAT ARE INALIGNMENT WITH THE DONOR OR GRANTOR'S INTENT AND REQUIREMENTS. PERIODICALLY BGCA RECEIVES DETAILED FINANCIAL AND PROGRAMMATIC REPORTS FROM THE SUB-RECIPIENTS (I.E. CLUBS RECEIVING PASS-THROUGH FUNDS FROM BGCA, TO DOCUMENT THEIR USE OF THE FUNDS FOR THE SPECIFIC PURPOSE FOR WHICH THEY ARE GRANTED). THESE REPORTS ALSO INCLUDE SUB-RECIPIENT CLUB FINANCIAL STATEMENT AUDIT REPORTS AND IF APPLICABLE, AUDIT REPORTS IN ACCORDANCE WITH OMB CIRCULAR A-133 FOR THE USE OF FEDERAL FUNDS. LIKEWISE, FINANCIAL AND PROGRAMMATIC REPORTS ARE ALSO ISSUED BY BGCA TO THE APPROPRIATE FUNDING SOURCES - FEDERAL AGENCIES OR PRIVATE SECTOR DONORS - DETAILING THE USE OF GRANT/DONATED FUNDS AND PROGRAMMATIC ACHIEVEMENTS/OUTCOMES. BGCA ALSO CONDUCTS NUMEROUS ONSITE VISITS OF LOCAL CLUB ORGANIZATIONS AND THEIR GRANT AND FISCAL MANAGEMENT PROCEDURES, AGAIN TO ENSURE THAT THE CLUBS ARE COMPLIANT WITH THE TERMS OF THE GRANTS AWARDED TO THEM BY BGCA AND ARE USING THE GRANT FUNDS APPROPRIATELY FOR THE DELIVERABLES OF THE GRANTS. THE MAJORITY OF THESE SITE VISITS ARE CONDUCTED BY INDEPENDENT CPA FIRMS ON BEHALF OF BGCA. BGCA HAS CONTRACTED WITH SCHOLARSHIP AMERICA, A SCHOLARSHIP MANAGEMENT SERVICE, TO ADMINISTER SCHOLARSHIPS TO ELIGIBLE CLUBS' KIDS.

**SCHEDULE J
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (such as maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	X
b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X
c Participate in or receive payment from an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	X
b Any related organization?	5b	X
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	X
b Any related organization?	6b	X
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) (Rev. 12-2024)

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) CLARK, JAMES L. PRESIDENT & CEO	(i)	688,503.	295,000.	1,262,831.	23,550.	28,786.	2,298,670.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ORR, LORRAINE E EXECUTIVE VP & CHIEF OPERATIONS OFFI	(i)	502,899.	110,962.	81,567.	24,150.	28,786.	748,364.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) UNGLO, SAMUEL J. EXECUTIVE VP & CHIEF FINANCIAL OFFIC	(i)	474,139.	108,104.	73,954.	23,945.	28,786.	708,928.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ANASTASI, ELIZABETH CHIEF DEVELOPMENT & PUBLIC AFFAIRS O	(i)	449,399.	104,754.	70,354.	23,550.	19,634.	667,691.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MORAIN, KRISTINE B. EXECUTIVE VP & GENERAL COUNSEL, & SE	(i)	404,969.	112,489.	53,196.	23,550.	28,786.	622,990.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ROBINSON, FELICIA SVP, HUMAN RESOURCES	(i)	303,901.	110,228.	59,760.	21,093.	28,786.	523,768.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) DUGAN, MELISSA P. SVP, GOVERNMENT RELATIONS	(i)	298,323.	70,166.	61,544.	24,150.	19,273.	473,456.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) FOWLKES, ELIZABETH M. SVP, STRATEGY	(i)	286,312.	87,246.	29,432.	24,150.	28,667.	455,807.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MILLER, JOHN R. SVP, AFFILIATE RELATIONS	(i)	267,427.	89,344.	63,249.	24,150.	11,414.	455,584.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) MILLER, MISTY L. SVP, ORGANIZATIONAL DEVELOPMENT	(i)	301,262.	65,138.	54,863.	22,005.	11,793.	455,061.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) MERHIB, VANESSA E. SVP, DEVELOPMENT	(i)	248,222.	60,824.	58,755.	22,748.	26,954.	417,503.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 4B:

NAME: JIM CLARK, DESCRIPTION: SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN,
CURRENT YEAR AMOUNT: \$1,045,796. PLAN DESCRIPTION: IN 2011 THE BOARD OF
GOVERNORS APPROVED A SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN FOR THE BENEFIT
OF A MEMBER OF SENIOR MANAGEMENT WHEREBY A RETIREMENT BENEFIT WILL BE
EARNED RATABLY BY THE EXECUTIVE DURING THE SERVICE TERM AS DEFINED IN THE
PLAN AGREEMENT. THE VESTED AMOUNT WILL BE PAID TO THE EXECUTIVE UPON
RETIREMENT, DISABILITY, OR TERMINATION WITHOUT CAUSE AS DEFINED IN THE PLAN
AGREEMENT.

PART I, LINE 5:

"INCENTIVE COMPENSATION
BGCA HAS A PAY AT-RISK PROGRAM THAT HOLDS BACK A PORTION OF THE PERSON'S
PAY OPPORTUNITY UNTIL MULTIPLE, STRETCH PERFORMANCE CRITERIA ARE MET. NONE
OF THE PAY AT RISK WILL BE EARNED BY ANY ONE PERSON UNTIL A PRE-ESTABLISHED
LEVEL OF FINANCIAL PERFORMANCE IS ATTAINED, ENSURING THAT WE HAVE THE
FINANCIAL RESOURCES TO MEET THE OBJECTIVES OF OUR MISSION, FIRST AND
FOREMOST. BONUSES OR INCENTIVE COMPENSATION WAS ACCRUED AND PAID TO
OFFICERS AND KEY EMPLOYEES IN 2024 UPON THE APPROVAL OF THE COMPENSATION
COMMITTEE.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization: **BOYS & GIRLS CLUBS OF AMERICA**
Employer identification number: **13-5562976**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	44	1,493,152. FMV	
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ()				
26	Other ()				
27	Other ()				
28	Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2024

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER OF CONTRIBUTIONS IS BASED ON THE NUMBER OF INDIVIDUAL CONTRIBUTIONS RECEIVED.

SCHEDULE M, PART I, LINE 32B:

BOYS & GIRLS CLUBS OF AMERICA USES THE SERVICES OF AUCTIONEERS AT FUNDRAISING EVENTS AND A THIRD PARTY TO PROCESS THE SALE OF SECURITIES.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PRODUCTIVE, CARING, RESPONSIBLE CITIZENS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
YOUNG PEOPLE, ESPECIALLY THOSE WHO NEED US MOST, TO REACH THEIR FULL
POTENTIAL AS PRODUCTIVE, CARING, RESPONSIBLE CITIZENS."

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
THAT ARE RELEVANT TO THE SPECIFIC TOPIC ADDRESSED BY THE PROGRAM.
CURRICULA WILL INCORPORATE SPECIFIC COMPONENTS TO INCREASE YOUNG
PEOPLE'S EMOTIONAL SAFETY AS THEY PARTICIPATE IN PROGRAMS. WE KNOW FROM
OUR LOCAL CLUB LEADERS THAT TRAINING FOR YOUTH DEVELOPMENT
PROFESSIONALS IS ONE OF THE MOST IMPORTANT SERVICES BGCA PROVIDES, AND
WE ALSO KNOW THROUGH OUR DATA THAT REGULAR TRAINING FOR STAFF CREATES
BETTER OUTCOMES FOR YOUTH. BGCA'S ABILITY TO DRIVE YOUTH OUTCOMES
RELIES ON THE POWER OF OUR PEOPLE AND THE IMPACT OF LEADERSHIP. BY
DEVELOPING LEADERS WHO ARE CAPABLE OF FOSTERING SAFE LEARNING
ENVIRONMENTS, CLUB YOUTH WILL GAIN THE ESSENTIAL SKILLS NECESSARY TO BE
PRODUCTIVE, CARING AND RESPONSIBLE CITIZENS. BGCA'S TRAINING MODEL IS
CONTINUALLY EVOLVING TO MEET THE NEEDS OF CLUB STAFF AND YOUTH AND
ENSURE THAT ALL STAFF HAVE THE OPPORTUNITY TO RECEIVE TRAININGS,
WHETHER THEY ARE IN URBAN, RURAL, NATIVE OR MILITARY COMMUNITIES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
YOUTH IDENTIFIED AS AT HIGH RISK FOR INVOLVEMENT IN DELINQUENCY OR
GANGS. GOAL 5: PROMOTE POSITIVE OUTCOMES AND REDUCE RISK FACTORS FOR
DETAINED YOUTH. BGCA CONTINUES TO DEVELOP AND IMPLEMENT EFFECTIVE
SYSTEMS, PROCESSES, TOOLS, AND RESOURCES TO SUPPORT THE MENTORING
IMPACT OF BOYS & GIRLS CLUBS. TO THAT END, BGCA HAS MADE SIGNIFICANT
COMMITMENTS TO OUR SUPPORTERS, CLUBS, NATIONAL YOUTH SERVING
ORGANIZATIONS AND OTHER INVESTED PARTIES, TO DEVELOP AND UPDATE THE
FOLLOWING NEW PROGRAM ELEMENTS DESIGNED TO ENHANCE MENTORING SERVICES
TO HIGH-RISK YOUTH, INCLUDING YOUTH RESIDING IN HIGH-RISK ENVIRONMENTS,
DETAINED YOUTH AND OPIOID IMPACTED YOUTH. BGCA WILL DEVELOP AND
IMPLEMENT ONLINE TRAININGS IN THREE AREAS BY THE END OF OJJDP FY 2023
QUARTER 4: . MENTOR TRAINING: INTEGRATING TRAUMA-INFORMED PRACTICES.
MENTEE TRAINING: SAFE PARTICIPATION IN VIRTUAL MENTORING.
PARENT/GUARDIAN TRAINING: SAFE PARTICIPATION IN VIRTUAL MENTORING FOR
YOUR CHILD LINE

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
YEAR REPRESENTATIVES MAKES MORE THAN 100 APPEARANCES ANNUALLY TO SPEAK
ON BEHALF OF 4.7 MILLION YOUNG PEOPLE SERVED BY THE BOYS & GIRLS CLUBS.
AND, WEVE MADE COLLEGIATE DREAMS A REALITY BY DISTRIBUTING MORE THAN \$1
MILLION IN SCHOLARSHIPS ANNUALLY.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
OTHER PROGRAM SERVICES - BOYS & GIRLS CLUBS OF AMERICA HAS NATIONALLY
RECOGNIZED PROGRAMS THAT ADDRESS TODAY'S MOST PRESSING YOUTH ISSUES,
TEACHING YOUNG PEOPLE THE SKILLS THEY NEED TO SUCCEED IN LIFE. NATIONAL
PROGRAMS ARE AVAILABLE IN FIVE CORE PROGRAM AREAS OF EDUCATION, HEALTH
AND WELLNESS, SPORTS AND RECREATION, THE ARTS, AND LEADERSHIP AND

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Name of the organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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SERVICE. BOYS & GIRLS CLUBS OF AMERICA'S NATIONAL PROGRAMS TAKE MEMBERS FROM THE CLUBHOUSE TO THE WHITE HOUSE; FROM THE GAMES ROOM TO THE CORPORATE BOARDROOM; AND FROM ART CLASS TO DESIGN CAREERS. THERE ARE SEVERAL OTHER PROGRAMS FUNDED BY VARIOUS DONORS AT DIFFERENT LEVELS. EXPENSES \$ 16,944,201. INCLUDING GRANTS OF \$ 0. REVENUE \$ 13,062,414.

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERS: THE MEMBERS ARE MADE UP OF THE INDIVIDUAL CLUBS AND EACH RECEIVE ONE VOTE. NATIONAL COUNCIL: THE BOARD OF GOVERNORS IS ELECTED BY A PLURALITY VOTE AT THE ANNUAL MEETING OF THE NATIONAL COUNCIL FOR A THREE-YEAR TERM. VOTING RIGHTS: THE BOARD OF GOVERNORS CONSISTS OF THREE CATEGORIES OF BOARD MEMBERS: 1. GOVERNORS; 2. LIFE MEMBERS; AND 3. GOVERNORS EMERITUS. ONLY THE GOVERNORS HAVE FULL VOTING RIGHTS AND PRIVILEGES. DECISIONS OF THE GOVERNING BODY SUBJECT TO APPROVAL: THE POLICIES OF BOYS & GIRLS CLUBS OF AMERICA ("BGCA") ARE DETERMINED BY A NATIONAL COUNCIL WHICH ESTABLISHES THE REQUIREMENTS FOR MEMBERSHIP IN THE CORPORATION; ESTABLISHES OPERATING STANDARDS; ELECTS MEMBERS OF THE BOARD OF GOVERNORS; AND DETERMINES ANNUAL MEMBERSHIP DUES TO BE PAID BY THE MEMBER ORGANIZATIONS. THE NATIONAL COUNCIL CONSISTS OF ONE DELEGATE FROM EACH MEMBER ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 7A:

MEMBERS: THE MEMBERS ARE MADE UP OF THE INDIVIDUAL CLUBS AND EACH RECEIVE ONE VOTE. NATIONAL COUNCIL: THE BOARD OF GOVERNORS IS ELECTED BY A PLURALITY VOTE AT THE ANNUAL MEETING OF THE NATIONAL COUNCIL FOR A THREE-YEAR TERM. VOTING RIGHTS: THE BOARD OF GOVERNORS CONSISTS OF THREE CATEGORIES OF BOARD MEMBERS: 1. GOVERNORS; 2. LIFE MEMBERS; AND 3. GOVERNORS EMERITUS. ONLY THE GOVERNORS HAVE FULL VOTING RIGHTS AND PRIVILEGES. DECISIONS OF THE GOVERNING BODY SUBJECT TO APPROVAL: THE POLICIES OF BOYS & GIRLS CLUBS OF AMERICA ("BGCA") ARE DETERMINED BY A NATIONAL COUNCIL WHICH ESTABLISHES THE REQUIREMENTS FOR MEMBERSHIP IN THE CORPORATION; ESTABLISHES OPERATING STANDARDS; ELECTS MEMBERS OF THE BOARD OF GOVERNORS; AND DETERMINES ANNUAL MEMBERSHIP DUES TO BE PAID BY THE MEMBER ORGANIZATIONS. THE NATIONAL COUNCIL CONSISTS OF ONE DELEGATE FROM EACH MEMBER ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 7B:

MEMBERS: THE MEMBERS ARE MADE UP OF THE INDIVIDUAL CLUBS AND EACH RECEIVE ONE VOTE. NATIONAL COUNCIL: THE BOARD OF GOVERNORS IS ELECTED BY A PLURALITY VOTE AT THE ANNUAL MEETING OF THE NATIONAL COUNCIL FOR A THREE-YEAR TERM. VOTING RIGHTS: THE BOARD OF GOVERNORS CONSISTS OF THREE CATEGORIES OF BOARD MEMBERS: 1. GOVERNORS; 2. LIFE MEMBERS; AND 3. GOVERNORS EMERITUS. ONLY THE GOVERNORS HAVE FULL VOTING RIGHTS AND PRIVILEGES. DECISIONS OF THE GOVERNING BODY SUBJECT TO APPROVAL: THE POLICIES OF BOYS & GIRLS CLUBS OF AMERICA ("BGCA") ARE DETERMINED BY A NATIONAL COUNCIL WHICH ESTABLISHES THE REQUIREMENTS FOR MEMBERSHIP IN THE CORPORATION; ESTABLISHES OPERATING STANDARDS; ELECTS MEMBERS OF THE BOARD OF GOVERNORS; AND DETERMINES ANNUAL MEMBERSHIP DUES TO BE PAID BY THE MEMBER ORGANIZATIONS. THE NATIONAL COUNCIL CONSISTS OF ONE DELEGATE FROM EACH MEMBER ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 11B:

GOVERNING BODY'S REVIEW OF FORM 990 A DRAFT OF THE FORM 990 IS CIRCULATED TO THE AUDIT COMMITTEE OF THE BOARD OF GOVERNORS FOR ITS REVIEW, RECOMMENDATIONS AND APPROVAL. CHANGES, IF ANY, RECOMMENDED BY THE COMMITTEE ARE INCORPORATED IN THE FORM 990 BEFORE ITS SUBMISSION. A DRAFT OF THE FORM

Name of the organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
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990 IS ALSO CIRCULATED TO ALL GOVERNORS FOR THEIR REVIEW AND RECOMMENDATIONS, WHICH ARE CONSIDERED BY THE AUDIT COMMITTEE IN ITS APPROVAL PROCESS. A FINALIZED VERSION OF THE FORM 990 IS PROVIDED TO THE COMPLETE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C:

MONITORING CONFLICTS OF INTEREST BOYS & GIRLS CLUBS OF AMERICA HAS DEVELOPED TWO SEPARATE CODES OF ETHICS POLICIES ONE FOR THE EMPLOYEES AND THE OTHER FOR GOVERNORS AND TRUSTEES, BOTH OF WHICH ADDRESS CONFLICTS OF INTERESTS AND WHISTLE BLOWING POLICIES WITHIN THEM. THESE POLICIES WERE APPROVED BY THE BOARD OF GOVERNORS. THE CODE OF ETHICS FOR EMPLOYEES IS EXECUTED BY ALL NEW EMPLOYEES AT THE TIME OF HIRE AND ANNUALLY ON AN ONGOING BASIS. LIKEWISE, THE CODE OF ETHICS FOR GOVERNORS MUST BE EXECUTED BY ALL NEW GOVERNORS AND THEY ARE ASKED TO REVIEW AND EXECUTE ON AN ANNUAL BASIS. THE HUMAN RESOURCE DEPARTMENT OF BOYS & GIRLS CLUBS OF AMERICA IS RESPONSIBLE FOR MONITORING THE EXECUTION OF THE EMPLOYEES' CODE OF ETHICS AND THE RESOURCE DEVELOPMENT DEPARTMENT IS RESPONSIBLE FOR MONITORING THE EXECUTION CODE OF ETHICS FOR GOVERNORS & TRUSTEES. IN ADDITION, THE BOARD OF GOVERNORS HAS AN ETHICIST ON THE BOARD TO MONITOR ETHICAL CONCERNS AT THAT LEVEL. BOYS & GIRLS CLUBS OF AMERICA HAS AN ETHICS HOTLINE AND TWO ETHICS OFFICERS WHO MONITOR ETHICAL CONCERNS ON AN ONGOING BASIS BY:- ENSURING THE CODE OF ETHICS IS UPDATED AT LEAST ANNUALLY AND CONTINUES TO REPLICATE BEST PRACTICES OF OTHER FOR PROFIT AND NOT-FOR-PROFIT ORGANIZATIONS; - REVIEWING AND RESPONDING APPROPRIATELY TO ALL QUESTIONS, ISSUES, AND COMPLAINTS AND ENSURING THE CODE OF ETHICS IS CLARIFIED AND/OR REVISED BASED ON THE INPUT RECEIVED; - REPORTING ANY SIGNIFICANT ETHICAL CONCERNS TO ALL NECESSARY COMMITTEES OF THE BOARD AND/OR THE BOARD; -REQUIRING A MEMBER OF THE BOARD OF GOVERNORS RECEIVE ALL FORMAL COMPLAINTS AND ENLIST THEIR INVOLVEMENT IN THE RESOLUTION AND RESPONSE TO COMPLAINTS AS NEEDED; AND - CONDUCTING TRAINING ON THE CODE OF ETHICS AS NEEDED.

FORM 990, PART VI, SECTION B, LINE 15:

PROCESS OF DETERMINING COMPENSATION THE TOTAL COMPENSATION FOR ALL SENIOR LEADERSHIP IS DETERMINED BY BOYS & GIRLS CLUBS OF AMERICA'S ("BGCA'S") BOARD OF GOVERNORS THROUGH THE HUMAN RESOURCES AND COMPENSATION COMMITTEE ("HRCC"), WHICH WORKS WITH AN INDEPENDENT FIRM TO ASSESS THE MARKETPLACE THOROUGHLY TO DETERMINE COMPARABLE SALARY PRACTICES, "PEER COMPARISON" COMPENSATION DATA, AND OTHER RELATED TRENDS IN THE NOT-FOR PROFIT SECTOR. THE INDEPENDENT FIRM ALSO PROVIDES A DETAILED REPORT OF THEIR ANALYSIS, COMPARISONS AND RECOMMENDATIONS TO THE HRCC. THIS REVIEW IS CONDUCTED ON A REGULAR BASIS. IN ADDITION, EVERY MARCH, THE HRCC REVIEWS EACH SENIOR LEADERSHIP TEAM MEMBER'S TOTAL COMPENSATION BASED ON PERFORMANCE FEEDBACK ON THE INDIVIDUAL AS WELL AS THE ORGANIZATION AND APPROVES THE UPCOMING ANNUAL TOTAL COMPENSATION AND BENEFITS PACKAGE PRIOR TO ANY CHANGES IN COMPENSATION AND/OR BENEFITS. ALL COMPENSATION AND BENEFIT DECISIONS OF THE HRCC ARE COMPLETED AND DOCUMENTED AS REQUIRED TO MEET THE REBUTTABLE PRESUMPTION OF REASONABLENESS UNDER THE INTERMEDIATE SANCTIONS REGULATIONS. THE PROCESS DESCRIBED HERE WAS LAST COMPLETED IN 2024.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

GA, AL, AZ, AR, CA, CO, CT, DE, DC, FL, HI, ID, IL, IN, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 18:

APPLICATION FOR RECOGNITION OF EXEMPTION BOYS AND GIRLS CLUBS OF AMERICA DOES NOT HAVE FORMS 1023 OR 1024. THE ORGANIZATION HAS BEEN CHARTERED UNDER

Name of the organization BOYS & GIRLS CLUBS OF AMERICA	Employer identification number 13-5562976
PUBLIC LAW 84-988, S. 4184, APPROVED AUGUST 6, 1956, AS AMENDED BY PUBLIC LAW 102-199, H.R. 525, APPROVED DECEMBER 10, 1991.	

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIALS BOYS & GIRLS CLUBS OF AMERICA MAINTAINS A COMPREHENSIVE WEBSITE WWW.BGCA.ORG THAT INCLUDES MULTIPLE YEARS OF ANNUAL REPORTS AND FORMS 990 TO WHICH THE GENERAL PUBLIC HAS ACCESS. THE WEBSITE ALSO PROVIDES INFORMATION REGARDING THE HISTORY OF THE ORGANIZATION, BOARD OF GOVERNORS, MISSION OF THE ORGANIZATION, DETAILS OF VARIOUS PROGRAMS, PARTNERSI, ALUMNI, PRIVACY POLICY ETC.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

INTERCOMPANY TRANSFER	37,046,824.
SHARED SERVICES REVENUE	355,750.
RELEASE OF NET ASSETS	7,465,459.
TOTAL TO FORM 990, PART XI, LINE 9	44,868,033.

**SCHEDULE R
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization <p align="center">BOYS & GIRLS CLUBS OF AMERICA</p>	Employer identification number <p align="center">13-5562976</p>
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Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
ALABAMA ALLIANCE OF BGC INC. - 63-1232492 P.O. BOX 1016 ALEXANDER CITY, AL 35011	YOUTH DEVELOP	ALABAMA	501(C)(4)		BGCA	X	
ARIZONA ALLIANCE OF BGC INC. - 86-1039968 10515 E. LAKEVIEW DRIVE SCOTTSDALE, AZ 85258	YOUTH DEVELOP	ARIZONA	501(C)(4)		BGCA	X	
ARKANSAS ALLIANCE OF BGC INC. - 71-0822051 611 MAIN STREET N LITTLE ROCK, AR 72114	YOUTH DEVELOP	ARKANSAS	501(C)(4)		BGCA	X	
CALIFORNIA ALLIANCE OF BGC INC. - 91-2084469 P.O. BOX 360 ROUGH READY, CA 95975	YOUTH DEVELOP	CALIFORNIA	501(C)(4)		BGCA	X	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) (Rev. 1-2025)

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
COLORADO ALLIANCE OF BGC INC. - 06-1653186 103 SMOKEY STREET FORT COLLINS, CO 80525	YOUTH DEVELOP	COLORADO	501(C)(4)		BGCA	X	
CONNECTICUT ALLIANCE OF BGC INC - 33-1064638 ONE POSITIVE PLACE, PO BOX 209 SHELTON, CT 06484	YOUTH DEVELOP	CONNECTICUT	501(C)(4)		BGCA	X	
FLORIDA ALLIANCE OF BGC INC. - 65-0839955 4384 NICOKE CIRCLE TEQUESTA, FL 33469	YOUTH DEVELOP	FLORIDA	501(C)(4)		BGCA	X	
GEORGIA ALLIANCE OF BGC INC. - 01-0557882 P.O. BOX 1130 ALBANY, GA 31702	YOUTH DEVELOP	GEORGIA	501(C)(4)		BGCA	X	
HAWAII ALLIANCE OF BGC INC. - 30-0457526 P.O. BOX 427 KAHULUI, HI 96733	YOUTH DEVELOP	HAWAII	501(C)(4)		BGCA	X	
IDAHO ALLIANCE OF BGC INC. - 84-1674661 10424 BARNSALE DRIVE BOISE, ID 83704	YOUTH DEVELOP	IDAHO	501(C)(4)		BGCA	X	
ILLINOIS ALLIANCE OF BGC INC. - 36-4327562 112 W EDWARDS STREET SPRINGFIELD, IL 62704	YOUTH DEVELOP	ILLINOIS	501(C)(4)		BGCA	X	
INDIANA ALLIANCE OF BGC INC. - 35-2129067 2236 E 10TH ST., SUITE 2000 NDIANAPOLIS, IN 04620	YOUTH DEVELOP	INDIANA	501(C)(4)		BGCA	X	
IOWA ALLIANCE OF BGC INC. - 42-1516490 1350E WASHINGTON AVENUE DES MOINES, IA 50312	YOUTH DEVELOP	IOWA	501(C)(4)		BGCA	X	
KANSAS ALLIANCE OF BGC INC. - 01-0650318 2150 SW WESTPORT DR, SUITE 204 TOPEKA, KS 66614	YOUTH DEVELOP	KANSAS	501(C)(4)		BGCA	X	
KENTUCKY ALLIANCE OF BGC INC. - 61-1364080 P.O. BOX 4989 LOUISVILLE, KY 40204	YOUTH DEVELOP	KENTUCKY	501(C)(4)		BGCA	X	
LOUISIANA ALLIANCE OF BGC INC. - 72-1491228 500 EVERGREEN STREET WEST MONROE, LA 71292	YOUTH DEVELOP	LOUISIANA	501(C)(4)		BGCA	X	

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
MAINE ALLIANCE OF BGC INC. - 20-2953315 277 CUMBERLAND AVE PO BOX 7830 PORTLAND, ME 04112	YOUTH DEVELOP	MAINE	501(C)(4)		BGCA	X	
MARYLAND ALLIANCE OF BGC INC. - 52-2312888 404 AGGIES CIRCLE, UNIT L BELAIR, MD 21014	YOUTH DEVELOP	MARYLAND	501(C)(4)		BGCA	X	
MASSACHUSETTS ALLIANCE OF BGC INC. - 06-1684675, CHARLES GARDNER LANE, WOBURN, MA 01801	YOUTH DEVELOP	MASSACHUSETTS	501(C)(4)		BGCA	X	
MICHIGAN ALLIANCE OF BGC INC. - 38-3636955 1545 EAST LINCOLN AVENUE ROYAL OAK, MI 78067	YOUTH DEVELOP	MICHIGAN	501(C)(4)		BGCA	X	
MINNESOTA ALLIANCE OF BGC INC. - 80-0037988 6500 NICOLLET AVE, SUITE 201 MINNEAPOLIS, MN 55423	YOUTH DEVELOP	MINNESOTA	501(C)(4)		BGCA	X	
MISSISSIPPI ALLIANCE OF BGC INC. - 64-0932322, 1500 NORTH HARPER RD, SUITE 3B, CORINTH, MS 38834	YOUTH DEVELOP	MISSISSIPPI	501(C)(4)		BGCA	X	
MISSOURI ALLIANCE OF BGC INC. - 43-1870548 1460 BEE CREEK ROAD BRANSON, MO 65616	YOUTH DEVELOP	MISSOURI	501(C)(4)		BGCA	X	
MONTANA ALLIANCE OF BGC INC. - 81-0536980 505 ORCHARD LANE BILLINGS, MT 59101	YOUTH DEVELOP	MONTANA	501(C)(4)		BGCA	X	
NEBRASKA ALLIANCE OF BGC INC. - 27-2250924 2610 HAMILTON STREET OMAHA, NE 68131	YOUTH DEVELOP	NEBRASKA	501(C)(4)		BGCA	X	
NEVADA ALLIANCE OF BGC INC. - 74-3128043 2680 E. 9TH STREET RENO, NV 89512	YOUTH DEVELOP	NEVADA	501(C)(4)		BGCA	X	
NEW HAMPSHIRE ALLIANCE OF BGC INC. - 56-2425831, 47 GRAND AVENUE, NASHUA, NH 03060	YOUTH DEVELOP	NEW HAMPSHIRE	501(C)(4)		BGCA	X	
NEW JERSEY ALLIANCE OF BGC INC. - 22-3621285 822 CLIFTON AVENUE CLIFTON, NJ 07015	YOUTH DEVELOP	NEW JERSEY	501(C)(4)		BGCA	X	

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
NEW MEXICO ALLIANCE OF BGC INC. - 43-1950851 551 CORDOVA ROAD BOX 325 SANTA FE, NM 87505	YOUTH DEVELOP	NEW MEXICO	501(C)(4)		BGCA	X	
NEW YORK ALLIANCE OF BGC INC. - 13-4065411 282 BABCOK STREET, FLOOR 2 BUFFALO, NY 14210	YOUTH DEVELOP	NEW YORK	501(C)(4)		BGCA	X	
NORTH CAROLINA ALLIANCE OF BGC INC. - 55-0856392, 701 N. RALEIGH BOULEVARD, RALEIGH, NC 27610	YOUTH DEVELOP	NORTH CAROLINA	501(C)(4)		BGCA	X	
OHIO ALLIANCE OF BGC INC. - 31-1704802 262 S. THIRD STREET COLUMBUS, OH 43215	YOUTH DEVELOP	OHIO	501(C)(4)		BGCA	X	
OKLAHOMA ALLIANCE OF BGC INC. - 73-1598475 1300 E. 15TH STREET, SUITE 150 EDMOND, OK 73103	YOUTH DEVELOP	OKLAHOMA	501(C)(4)		BGCA	X	
OREGON ALLIANCE OF BGC INC. - 93-1303337 1395 SUMMER STREET NE SALEM, OR 97301	YOUTH DEVELOP	OREGON	501(C)(4)		BGCA	X	
PENNSYLVANIA ALLIANCE OF BGC INC - 25-1857470, 5 HANOVER SQUARE 3RD FLOOR, NEW YORK, NY 10004	YOUTH DEVELOP	NEW YORK	501(C)(4)		BGCA	X	
RHODE ISLAND ALLIANCE OF BGC INC. - 05-0504432, 180 S. MAIN STREET, PROVIDENCE, RI 02903	YOUTH DEVELOP	RHODE ISLAND	501(C)(4)		BGCA	X	
SOUTH CAROLINA ALLIANCE OF BGC INC. - 57-1092504, P.O. BOX 423, COLUMBIA, SC 29201	YOUTH DEVELOP	SOUTH CAROLINA	501(C)(4)		BGCA	X	
SOUTH DAKOTA ALLIANCE OF BGC INC. - 74-3083839, P.O. BOX 833, WATERTOWN, SD 57201	YOUTH DEVELOP	SOUTH DAKOTA	501(C)(4)		BGCA	X	
TENNESSEE ALLIANCE OF BGC INC. - 62-1835398 220 CARRICK STREET, SUITE 318 KNOXVILLE, TN 37921	YOUTH DEVELOP	TENNESSEE	501(C)(4)		BGCA	X	
TEXAS ALLIANCE OF THE BGC INC. - 75-2939705 100 COMMONS ROAD SUITE 7 #206 DRIPPING SPRINGS, TX 78620	YOUTH DEVELOP	TEXAS	501(C)(4)		BGCA	X	

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
UTAH ALLIANCE OF BGC INC. - 82-0562906 244 E VINE ST, PO BOX 57071 MURRAY, UT 84107	YOUTH DEVELOP	UTAH	501(C)(4)		BGCA	X	
VERMONT ALLIANCE OF BGC INC. - 20-4319910 62 OAK STREET BURLINGTON, VT 05401	YOUTH DEVELOP	VERMONT	501(C)(4)		BGCA	X	
VIRGINIA ALLIANCE OF BGC INC. - 54-1946564 5511 STAPLES MILL RD, STE 301 RICHMOND, VA 23228	YOUTH DEVELOP	VIRGINIA	501(C)(4)		BGCA	X	
WASHINGTON ALLIANCE OF BGC INC. - 91-2157587 3003 SUNSET WAY SE TUMWATER, WA 98501	YOUTH DEVELOP	WASHINGTON	501(C)(4)		BGCA	X	
WEST VIRGINIA ALLIANCE OF BGC INC. - 20-1472867, P.O. BOX 1184, MARTINSBURG, WV 25402	YOUTH DEVELOP	WEST VIRGINIA	501(C)(4)		BGCA	X	
WISCONSIN ALLIANCE OF BGC INC. - 39-2008889 925 N. SILVERBROOK DRIVE WEST BEND, WI 53090	YOUTH DEVELOP	WISCONSIN	501(C)(4)		BGCA	X	
WYOMING ALLIANCE OF BGC INC. - 20-5386022 1701 E K STREET CASPER, WY 82601	YOUTH DEVELOP	WYOMING	501(C)(4)		BGCA	X	
BOYS & GIRLS CLUBS IN NEW JERSEY, INC - 27-0185288, 310 SOUTH STREET, MORRISTOWN, NJ 07940	SUPPORT B&GC	NEW JERSEY	501(C)(3)	LINE 7	BGCA	X	
BOYS & GIRLS CLUBS IN TENNESSEE, INC. - 26-4568046, 220 CARRICK STREET, SUITE 318, KNOXVILLE, TN 37921	SUPPORT B&GC	TENNESSEE	501(C)(3)	LINE 10	BGCA	X	
BOYS & GIRLS CLUBS IN TEXAS, INC. - 20-1493423, 13110 HIGHWAY 290 WEST, AUSTIN, TX 78737	SUPPORT B&GC	TEXAS	501(C)(3)	LINE 10	BGCA	X	
LOS ANGELES COUNTY ALLIANCE FOR BGC - 46-5058473, 578 WASHINGTON BLVD, SUITE 199, MARINA DEL REY, CA 90292	SUPPORT B&GC	CALIFORNIA	501(C)(3)	LINE 7	BGCA	X	
WASHINGTON STATE BGC ASSOCIATION - 35-2275325, P.O. BOX 1774, OLYMPIA, WA 98507	SUPPORT B&GC	WASHINGTON	501(C)(3)	LINE 7	BGCA	X	

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
BOYS & GIRLS CLUBS OF GEORGIA - 83-1259454 1275 PEACHTREE STREET, NE ATLANTA, GA 30309	SUPPORT B&GC	GEORGIA	501(C)(3)	LINE 10	BGCA	X	
BOYS & GIRLS CLUBS IN INDIANA - 81-4118364 973 N. SHADELAND AVENUE INDIANAPOLIS, IN 46219	SUPPORT B&GC	INDIANA	501(C)(3)	LINE 12A, I	BGCA	X	
BOYS & GIRLS CLUBS IN COLORADO - 47-1955928 2017 W. 9TH AVENUE DENVER, CO 80204	SUPPORT B&GC	COLORADO	501(C)(3)	LINE 7	BGCA	X	
BOYS & GIRLS CLUBS OF OHIO - 88-2909822 266 S. THIRD STREET COLUMBUS, OH 43215	SUPPORT B&GC	OHIO	501(C)(3)	LINE 7	BGCA	X	
BOYS & GIRLS CLUBS IN INDIAN COUNTRY - 02-0656763, 1275 PEACHTREE STREET NE, ATLANTA, GA 30309	SUPPORT B&GC	GEORGIA	501(C)(3)	LINE 7	BGCA	X	
BGCA FUNDS HOLDCO, INC. - 85-2422429 1275 PEACHTREE STREET NE ATLANTA, GA 30309	SUPPORT B&GC	GEORGIA	501(C)(3)	LINE 12A, I	BGCA	X	
BGCA IP SUPPORT CO - 85-2471762 1275 PEACHTREE STREET NE ATLANTA, GA 30309	SUPPORT B&GC	GEORGIA	501(C)(3)	LINE 12A, I	BGCA	X	
BGCA REAL ESTATE SUPPORT CO. - 85-2446390 1275 PEACHTREE STREET NE ATLANTA, GA 30309	SUPPORT B&GC	GEORGIA	501(C)(3)	LINE 12A, I	BGCA	X	
BOYS & GIRLS CLUBS IN ILLINOIS, INC. - 85-1740518, 112 W EDWARDS STREET, SPRINGFIELD, IL 62704	SUPPORT B&GC	ILLINOIS	501(C)(3)	LINE 12A, I	BGCA	X	

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)	X	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) BGCA FUNDS HOLDCO INC.	Q	216,870.	
(2) GEORGIA ALLIANCE OF BOYS & GIRLS CLUBS, INC.	Q	53,000.	
(3) MICHIGAN ALLIANCE OF BOYS & GIRLS CLUBS, INC.	S	5,043,741.	
(4) GEORGIA ALLIANCE OF BOYS & GIRLS CLUBS, INC.	S	734,939.	
(5) MISSOURI ALLIANCE OF BOYS & GIRLS CLUBS, INC.	S	100,000.	
(6)			

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

Department of the Treasury
Internal Revenue Service

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. BOYS & GIRLS CLUBS OF AMERICA	Taxpayer identification number (TIN) 13-5562976
	Number, street, and room or suite no. If a P.O. box, see instructions. 1275 PEACHTREE STREET NE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ATLANTA, GA 30309-3506	

Enter the Return Code for the return that this application is for (file a separate application for each return) **09**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08	Form 990-T (governmental entities)	15

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **JASON PENEGAR**
1275 PEACHTREE STREET NE - ATLANTA, GA 30309-3506

Telephone No. **(404) 487-5403** Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box _____
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box _____. If it is for part of the group, check this box _____ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15**, 20 **25**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 calendar year 20 **24** or
 tax year beginning _____, 20 _____, and ending _____, 20 _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2024, or fiscal year beginning _____, 2024, and ending _____, 20____

2024

Department of the Treasury
Internal Revenue Service

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

Name of filer **BOYS & GIRLS CLUBS OF AMERICA** EIN or SSN **13-5562976**

Name and title of officer or person subject to tax **JAMES L CLARK
PRESIDENT & CEO**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not complete more than one line in Part I.**

1a Form 990 check here <input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b _____
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b _____
7a Form 4720 check here <input checked="" type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b <u>261,730.</u>
8a Form 5227 check here <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize CLIFTONLARSONALLENLLP to enter my PIN 21744
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 69706855902
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature CLIFTONLARSONALLEN LLP Date 03/12/26

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form **8879-TE** (2024)

Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code

Department of the Treasury
Internal Revenue Service

(Sections 170(f)(10), 664(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4959, 4960, 4965, 4966, 4967, and 4968)
Go to www.irs.gov/Form4720 for instructions and the latest information.

2024

For calendar year 2024 or other tax year beginning _____, 2024, and ending _____,

Name of organization, entity, or person subject to tax BOYS & GIRLS CLUBS OF AMERICA Number, street, and room or suite no. (or P.O. box if mail is not delivered to street address) 1275 PEACHTREE STREET NE City or town, state or province, country, and ZIP or foreign postal code ATLANTA, GA 30309-3506	EIN or SSN 13-5562976 <input type="checkbox"/> Amended return Check box for type of annual return: <input checked="" type="checkbox"/> Form 990 <input type="checkbox"/> Form 990-EZ <input type="checkbox"/> Form 990-PF <input type="checkbox"/> Other <input type="checkbox"/> Form 5227
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		Yes	No
A Is the organization a foreign private foundation within the meaning of section 4948(b)? Show conversion rate to U.S. dollars. See instructions _____	x		x
B Entity (other than the organization) or person subject to tax: Are you required to file Form 4720 with respect to more than one organization in the current tax year? See instructions _____ If "Yes," attach a list showing the name and EIN for each organization with respect to which you will file Form 4720 for the current tax year.			x

Part I Taxes on Organization (Sections 170(f)(10), 664(c)(2), 4911(a), 4912(a), 4942(a), 4943(a), 4944(a)(1), 4945(a)(1), 4955(a)(1), 4959, 4960(a), 4965(a)(1), 4966(a)(1), and 4968(a))

1 Tax on undistributed income - Schedule B, line 4	1		
2 Tax on excess business holdings - Schedule C, line 7	2		
3 Tax on investments that jeopardize charitable purpose - Schedule D, Part I, column (f)	3		
4 Tax on taxable expenditures - Schedule E, Part I, column (h)	4		
5 Tax on political expenditures - Schedule F, Part I, column (f)	5		
6 Tax on excess lobbying expenditures - Schedule G, line 4	6		
7 Tax on disqualifying lobbying expenditures - Schedule H, Part I, column (e)	7		
8 Tax on premiums paid on personal benefit contracts	8		
9 Tax on being a party to prohibited tax shelter transactions - Schedule J, Part I, column (h)	9		
10 Tax on taxable distributions - Schedule K, Part I, column (f)	10		
11 Tax on a charitable remainder trust's unrelated business taxable income. Attach statement	11		
12 Tax on failure to meet the requirements of section 501(r)(3) - Schedule M, Part II, line 2	12		
13 Tax on excess executive compensation - Schedule N	13		261,730.
14 Tax on net investment income of private colleges and universities - Schedule O	14		
15 Total (add lines 1 - 14)	15		261,730.

Part II Taxes on a Manager, Self-Dealer, Disqualified Person, Donor, Donor Advisor, or Related Person
(Sections 4912(b), 4941(a), 4944(a)(2), 4945(a)(2), 4958(a), 4965(a)(2), 4966(a)(2), and 4967(a))

Name and address of related organization; city or town, state or province, country, ZIP or foreign postal code	Employer identification number	
1 Tax on self-dealing - Schedule A, Part II, column (d); and Part III, column (d)	1	
2 Tax on investments that jeopardize charitable purposes - Schedule D, Part II, column (d)	2	
3 Tax on taxable expenditures - Schedule E, Part II, column (d)	3	
4 Tax on political expenditures - Schedule F, Part II, column (d)	4	
5 Tax on disqualifying lobbying expenditures - Schedule H, Part II, column (d)	5	
6 Tax on excess benefit transactions - Schedule I, Part II, column (d); and Part III, column (d)	6	
7 Tax on being a party to prohibited tax shelter transactions - Schedule J, Part II, column (d)	7	
8 Tax on taxable distributions - Schedule K, Part II, column (d)	8	
9 Tax on prohibited benefits - Schedule L, Part II, column (d); and Part III, column (d)	9	
10 Total - Add lines 1 through 9	10	

1 Total tax (Part I, line 15 or Part II, line 10)	1		261,730.
2 Total payments including amount paid with Form 8868 (see instructions)	2		261,730.
3 Tax due. If line 1 is larger than line 2, enter amount owed (see instructions)	3		0.
4 Overpayment. If line 1 is smaller than line 2, enter the difference. This is your refund	4		

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 4720 (2024)

SCHEDULE A - Initial Taxes on Self-Dealing (Section 4941)

Part I Acts of Self-Dealing and Tax Computation					
(a) Act number	(b) Date of act	(c) Correction made?		(d) Description of act	
		Yes	No		
1					
2					
3					
4					
5					
(e) Question number from Form 990-PF, Part VII-B, or Form 5227, Part VIII, applicable to the act		(f) Amount involved in act		(g) Initial tax on self-dealer (10% of col. (f))	(h) Tax on foundation managers (if applicable) (lesser of \$20,000 or 5% of col. (f))

Part II Summary of Tax Liability of Self-Dealers and Proration of Payments			
(a) Names of self-dealers liable for tax	(b) Act no. from Part I, col. (a)	(c) Tax from Part I, col. (g), or prorated amount	(d) Self-dealer's total tax liability (add amounts in col. (c)) (see instructions)

Part III Summary of Tax Liability of Foundation Managers and Proration of Payments			
(a) Names of foundation managers liable for tax	(b) Act no. from Part I, col. (a)	(c) Tax from Part I, col. (h), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE B - Initial Tax on Undistributed Income (Section 4942)

1	Undistributed income for years before 2023 (from Form 990-PF for 2024, Part XII, line 6d)	1
2	Undistributed income for 2023 (from Form 990-PF for 2024, Part XII, line 6e)	2
3	Total undistributed income at end of current tax year beginning in 2024 and subject to tax under section 4942 (add lines 1 and 2)	3
4	Tax - Enter 30% of line 3 here and on Part I, line 1	4

SCHEDULE C - Initial Tax on Excess Business Holdings (Section 4943)

Business Holdings and Computation of Tax

If you have taxable excess holdings in more than one business enterprise, attach a separate schedule for each enterprise. Refer to the instructions for each line item before making any entries.

Name and address of business enterprise

Employer identification number

Form of enterprise (corporation, partnership, trust, joint venture, sole proprietorship, etc.)

		(a) Voting stock (profits interest or beneficial interest)	(b) Value	(c) Nonvoting stock (capital interest)
1	Foundation holdings in business enterprise	1		
2	Permitted holdings in business enterprise	2		
3	Value of excess holdings in business enterprise	3		
4	Value of excess holdings disposed of within 90 days; or, other value of excess holdings not subject to section 4943 tax (attach statement)	4		
5	Taxable excess holdings in business enterprise - line 3 minus line 4	5		
6	Tax - Enter 10% of line 5	6		
7	Total tax - Add amounts on line 6, columns (a), (b), and (c); enter total here and on Part I, line 2	7		

8	Did the organization dispose of excess holdings subject to tax reported on line 6? Attach a statement explaining (i) corrective action taken, or (ii) why corrective action has not been taken.	Yes	No
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SCHEDULE D - Initial Taxes on Investments That Jeopardize Charitable Purpose (Section 4944)

Part I Investments and Tax Computation

(a) Investment number	(b) Date of investment	(c) Correction made?		(d) Description of investment	(e) Amount of investment	(f) Initial tax on foundation (10% of col. (e))	(g) Initial tax on foundation managers (if applicable) - (lesser of \$10,000 or 10% of col. (e))
		Yes	No				
1							
2							
3							
4							
5							
Total - Column (f). Enter here and on Part I, line 3							
Total - Column (g). Enter total (or prorated amount) here and in Part II, column (c), below							

Part II Summary of Tax Liability of Foundation Managers and Proration of Payments

(a) Names of foundation managers liable for tax	(b) Investment no. from Part I, col. (a)	(c) Tax from Part I, col. (g), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE E - Initial Taxes on Taxable Expenditures (Section 4945)

Part I Expenditures and Computation of Tax					
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Correction made?		(e) Name and address of recipient
			Yes	No	
1					
2					
3					
4					
5					
(f) Description of expenditure and purposes for which made			(g) Question number from Form 990-PF, Part VI-B, or Form 5227, Part VIII, applicable to the expenditure		(h) Initial tax imposed on foundation (20% of col. (b))
Total - Column (h). Enter here and on Part I, line 4					
Total - Column (i). Enter total (or prorated amount) here and in Part II, column (c), below					

Part II Summary of Tax Liability of Foundation Managers and Proration of Payments			
(a) Names of foundation managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (i), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE F - Initial Taxes on Political Expenditures (Section 4955)

Part I Expenditures and Computation of Tax							
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Correction made?		(e) Description of political expenditure	(f) Initial tax imposed on organization or foundation (10% of col. (b))	(g) Initial tax imposed on managers (if applicable) (lesser of \$5,000 or 2½% of col. (b))
			Yes	No			
1							
2							
3							
4							
5							
Total - Column (f). Enter here and on Part I, line 5							
Total - Column (g). Enter total (or prorated amount) here and in Part II, column (c), below							

Part II Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments			
(a) Names of organization managers or foundation managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (g), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE G - Tax on Excess Lobbying Expenditures (Section 4911)

1	Excess of grass roots expenditures over grass roots nontaxable amount (from Schedule C (Form 990), Part II-A, column (b), line 1h). (See the instructions before making an entry.)	1
2	Excess of lobbying expenditures over lobbying nontaxable amount (from Schedule C (Form 990), Part II-A, column (b), line 1i). (See the instructions before making an entry.)	2
3	Excess lobbying expenditures - enter the larger of line 1 or line 2	3
4	Tax - Enter 25% of line 3 here and on Part I, line 6	4

SCHEDULE H - Taxes on Disqualifying Lobbying Expenditures (Section 4912)

Part I Expenditures and Computation of Tax					
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description of lobbying expenditures	(e) Tax imposed on organization (5% of col. (b))	(f) Tax imposed on organization managers (if applicable) - (5% of col. (b))
1					
2					
3					
4					
5					
Total - Column (e). Enter here and on Part I, line 7					
Total - Column (f). Enter total (or prorated amount) here and in Part II, column (c), below					

Part II Summary of Tax Liability of Organization Managers and Proration of Payments			
(a) Names of organization managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE I - Initial Taxes on Excess Benefit Transactions (Section 4958)

Part I Excess Benefit Transactions and Tax Computation				
(a) Transaction number	(b) Date of transaction	(c) Correction made?		(d) Description of transaction
		Yes	No	
1				
2				
3				
4				
5				
(e) Amount of excess benefit		(f) Initial tax on disqualified persons (25% of col. (e))		(g) Tax on organization managers (if applicable) (lesser of \$20,000 or 10% of col. (e))

SCHEDULE I - Initial Taxes on Excess Benefit Transactions (Section 4958) *Continued*

Part II Summary of Tax Liability of Disqualified Persons and Proration of Payments			
(a) Names of disqualified persons liable for tax	(b) Trans. no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Disqualified person's total tax liability (add amounts in col. (c)) (see instructions)

Part III Summary of Tax Liability of 501(c)(3), (c)(4) & (c)(29) Organization Managers and Proration of Payments			
(a) Names of 501(c)(3), (c)(4) & (c)(29) organization managers liable for tax	(b) Trans. no. from Part I, col. (a)	(c) Tax from Part I, col. (g), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

SCHEDULE J - Taxes on Being a Party to Prohibited Tax Shelter Transactions (Section 4965)

Part I Prohibited Tax Shelter Transactions (PTST) and Tax Imposed on the Tax-Exempt Entity (see instructions)				
(a) Transaction number	(b) Transaction date	(c) Type of transaction 1 - Listed 2 - Subsequently listed 3 - Confidential 4 - Contractual protection	(d) Description of transaction	
1				
2				
3				
4				
5				
(e) Did the tax-exempt entity know or have reason to know this transaction was a PTST when it became a party to the transaction?		(f) Net income attributable to the PTST	(g) 75% of proceeds attributable to the PTST	(h) Tax imposed on the tax-exempt entity (see instructions)
Yes	No			
Total - Column (h). Enter here and on Part I, line 9				

SCHEDULE L - Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967).

See the instructions.

Part I Prohibited Benefits and Tax Computation		
(a) Item number	(b) Date of prohibited benefit	(c) Description of benefit
1		
2		
3		
4		
5		
(d) Amount of prohibited benefit	(e) Tax on donors, donor advisors, or related persons (125% of col. (d)) (see instructions)	(f) Tax on fund managers (if applicable) (lesser of 10% of col. (d) or \$10,000) (see instructions)

Part II Summary of Tax Liability of Donors, Donor Advisors, Related Persons, and Proration of Payments			
(a) Names of donors, donor advisors, or related persons liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (e) or prorated amount	(d) Donor's, donor advisor's, or related person's total tax liability (add amounts in col. (c)) (see instructions)

Part III Summary of Tax Liability of Fund Managers and Proration of Payments			
(a) Names of fund managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (f) or prorated amount	(d) Fund manager's total tax liability (add amounts in col. (c)) (see instructions)

Schedule M - Tax on Hospital Organization for Failure to Meet the Community Health Needs Assessment Requirements (Sections 4959 and 501(r)(3)). (See instructions.)

Part I Failures to Meet Section 501(r)(3)

(a) Item number	(b) Name of hospital facility	(c) Description of the failure	(d) Tax year hospital facility last conducted a CHNA	(e) Tax year hospital facility last adopted an implementation strategy
1				
2				
3				
4				
5				

Part II Computation of Tax

1	Number of hospital facilities operated by the hospital organization that failed to meet the Community Health Needs Assessment requirements of section 501(r)(3)	1
2	Tax - Enter \$50,000 multiplied by line 1 here and on Part I, line 12	2

SCHEDULE N - Tax on Excess Executive Compensation (Section 4960). (See instructions.)

(a) Item number	(b) Name of covered employee	(c) Excess remuneration	(d) Excess parachute payment	(e) Total. Add column (c) and (d)
1	SEE STATEMENT 1			
2				
3				
4				
5				
6	Attachment, if necessary. See instructions			
Total (add column (e) items 1 - 6)				1,246,334.
Tax. Enter 21% of the amount above here and on Part I, line 13				261,730.

SCHEDULE O - Excise Tax on Net Investment Income of Private Colleges and Universities (Section 4968)

	(a) Name	(b) EIN	(c) Gross investment income (See instructions.)	(d) Capital gain net income	(e) Administrative expenses allocable to income included in cols. (c) and (d)	(f) Net investment income (See instructions.)
1	Filing Organization					
2	Related Organization					
3	Related Organization					
4	Related Organization					
5	Total from attachment, if necessary					
6	Total					
7	Excise Tax on Net Investment Income. Enter 1.4% of the amount in 6(f) here and on Part I, line 14					

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

PRESIDENT & CEO

Sign Here

Signature of officer or trustee

Title

Date

Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person

Date

May the IRS discuss this return with the preparer shown below? (see instructions) Yes No

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
KATHRINE A. WARLICK	KATHRINE A. WARLICK	03/12/26		P02065266
Firm's name CLIFTONLARSONALLENLLP			Firm's EIN	41-0746749
Firm's address	227 WEST TRADE STREET, SUITE 800 CHARLOTTE, NC 28202		Phone no.	704-998-5200

Form **4720** (2024)

(A) ITEM NO	(B) NAME OF COVERED EMPLOYEE	(C) EXCESS REMUNERATION	(D) EXCESS PARACHUTE PAYMENT	(E) TOTAL
1	JAMES L. CLARK	1,246,334.		1,246,334.
TOTAL EXCESS EXECUTIVE COMPENSATION				1,246,334.